

1 IN THE UNITED STATES DISTRICT COURT
2 FOR THE NORTHERN DISTRICT OF OHIO
3 EASTERN DIVISION
4 IN RE NATIONAL PRESCRIPTION MDL No. 2804
5 OPIATE LITIGATION Case No. 17-MD-2804
6 This Document Relates to: Judge Dan A. Polster
7 The County of Summit, Ohio,
8 et al., v.
9 Purdue Pharma L.P., et al.
10 Case No. 17-op-45004
11 The County of Cuyahoga v.
12 Purdue Pharma L.P., et al.
13 Case No. 18-op-45090
14 City of Cleveland, Ohio v.
15 Purdue Pharma L.P., et al.
16 Case No. 18-op-45132

17 Thursday, December 13, 2018

18 - - -

19 HIGHLY CONFIDENTIAL - SUBJECT TO FURTHER
20 CONFIDENTIALITY REVIEW
21 - - -

22 Videotaped deposition of PATRICIA WILLIAMS,
23 held at Foley & Lardner LLP, One Biscayne Tower,
24 2 Biscayne Boulevard, Suite 1900, Miami, Florida,
25 commencing at 9:22 a.m., on the above date,
 before Susan D. Wasilewski, Registered
 Professional Reporter, Certified Realtime
 Reporter, Certified Realtime Captioner.

 - - -

 GOLKOW LITIGATION SERVICES
 877.370.3377 ph | 917.591.5672 fax
 deps@golkow.com

1 APPEARANCES:

2 WEITZ & LUXENBERG

BY: ELLEN RELKIN, ESQUIRE

3 ADAM L. STOLTZ, ESQUIRE

700 Broadway

4 New York, New York 10003

(212) 558-5526

5 erelkin@weitzlux.com

astoltz@weitzlux.com

6 Representing the Plaintiffs

7

FOLEY & LARDNER LLP

8 BY: KATY E. KOSKI, ESQUIRE

111 Huntington Avenue

9 Boston, Massachusetts 02199

(617) 342-4000

10 kkoski@foley.com

Representing Anda, Inc., and the witness

11

12 WILLIAMS & CONNOLLY LLP

BY: JULI ANN LUND, ESQUIRE

13 725 Twelfth Street, N.W.

Washington, D.C. 20005

14 (202) 434-5239

jlund@wc.com

15 Representing Cardinal Health, Inc.

16

REED SMITH LLP

17 BY: CRISTINA CÁRDENAS, ESQUIRE

1001 Brickell Bay Drive, Suite 900

18 Miami, Florida 33131

(786) 747-0207

19 ccardenas@reedsmith.com

Representing AmerisourceBergen Corporation and

20 AmerisourceBergen Drug Corporation

21

JONES DAY

22 BY: CHRISTOPHER M. LOMAX, ESQUIRE

600 Brickell Avenue, Suite 3300

23 Miami, Florida 33131

(305) 714-9700

24 clomax@jonesday.com

Representing Walmart

25

1 APPEARANCES VIA TELEPHONE AND STREAM:

2 MARCUS & SHAPIRA LLP

BY: JAMES F. ROSENBERG, ESQUIRE

3 One Oxford Centre, 35th Floor

Pittsburgh, Pennsylvania 15219

4 (412) 471-3490

rosenberg@marcus-shapira.com

5 Representing HBC Service Company

6

7 ARNOLD & PORTER

BY: ZENO HOUSTON, ESQUIRE

8 250 West 55th Street

New York, New York 10019-9710

9 (212) 836-8000

zeno.houston@arnoldporter.com

10 Representing Endo Health Solutions Inc., Endo

Pharmaceuticals Inc., Par Pharmaceutical, Inc.,

11 Par Pharmaceutical Companies, Inc.,

(f/k/a Par Pharmaceutical Holdings, Inc.)

12

13

COVINGTON & BURLING LLP

14 BY: MICHELLE Y. YOCUM ESQUIRE

One CityCenter, 850 Tenth Street, NW

15 Washington, DC 20001-4956

(202) 662-6000

16 myocum@cov.com

Representing McKesson Corporation

17

18

ALSO PRESENT:

19

ANTHONY BARBARO, Videographer

20

BURTON KING, Weitz & Luxenberg

21

SHA'HUNI ROBINSON, Weitz & Luxenberg

22

23

24

25

1 - - -
 2 I N D E X
 3 - - -

4	Testimony of: PATRICIA WILLIAMS	PAGE
5	DIRECT EXAMINATION BY MS. RELKIN.....	10

6
 7
 8 E X H I B I T S

9 (Attached to the transcript)

10	ANDA-WILLIAMS DEPOSITION EXHIBITS	PAGE
11	Exhibit 1 Curriculum Vitae - Patricia L. Williams	16
12	Exhibit 2 Slide Presentation -	49
13	Anda_Opioid_MDL_0000711452 through 711470	
14	Exhibit 3 E-mail - Subject: Tussionex Item 201545	85
15	Anda_Opioids_MDL_0000107802 through 107803	
16	Exhibit 4 E-mail - Subject: C2 Promo with Teva Fentanyl Patches...	90
17	Anda_Opioids_MDL_0000610875	
18	Exhibit 5 E-mail - Subject: Actavis Match to Anda	94
19	Anda_Opioids_MDL_0000082451 through 82456	
20	Exhibit 6 E-mail - Subject: May Marketing Driver	95
21	Anda_Opioids_MDL_0000712121	
22	Exhibit 7 E-mail - Subject: CII Actavis Credits	100
23	Anda_Opioids_MDL_0000629163 through 629165	
24		
25		

1	E X H I B I T S		
2	(Attached to the transcript)		
3	WILLIAMS DEPOSITION EXHIBITS		PAGE
4	Exhibit 8	E-mail - Subject: Giant Eagle Stores list FINAL Actavis Oxycodone CR & Fentanyl Patch for Giant Eagle from Anda	111
5		Anda_Opioids_MDL_0000630034 through 630042	
6			
7	Exhibit 9	E-mail - Subject: Success Story - Oxy CR Made my Day!!	118
8		Anda_Opioids_MDL_0000629292	
9			
10	Exhibit 10	E-mail - Subject: PRODUCT UPDATE: Re-launch of Generic Oxycontin CR (Oxycodone CR 10, 20, 40, 80mg) from Actavis	122
11		Anda_Opioids_MDL_0000635640 through 635645	
12			
13	Exhibit 11	E-mail - Subject: Launch of Generic Ultram ER Tomorrow	129
14		Anda_Opioids_MDL_0000635385 through 635387	
15			
16	Exhibit 12	E-mail - Subject: PRODUCT UPDATE: Re-launch of Generic Oxycontin CR (Oxycodone CR 10, 20, 40, 80mg) from Actavis	131
17		Anda_Opioids_MDL_0000635359 through 635369	
18			
19	Exhibit 13	E-mail - Subject: PRODUCT UPDATE: Re-launch of Generic Oxycontin CR (Oxycodone CR 10, 20, 40, 80mg) from Actavis	136
20		Anda_Opioids_MDL_0000610604 through 610114	
21			
22			
23	Exhibit 14	E-mail - Subject: July Marketing Driver	140
24		Anda_Opioids_MDL_0000619354 through 619357	
25			

1	E X H I B I T S		
2	(Attached to the transcript)		
3	WILLIAMS DEPOSITION EXHIBITS		PAGE
4	Exhibit 15	E-mail - Subject: CII Products Available in Florida Warehouse 20 Anda_Opioids_MDL_0000111359 through 111361	143
6	Exhibit 16	E-mail - Subject: Launch Snapshot - Suboxone Tabs Day 1 Anda_Opioids_MDL_0000849833 through 849834	148
9	Exhibit 17	E-mail - Subject: Walgreens - Screen Shot - Control Limits Anda_Opioids_MDL_0000566549 through 566551	156
11	Exhibit 18	E-mail - Subject: Cust. # 206975 Van Buren Pharm. Anda_Opioids_MDL_0000711549 and 711550	170
14	Exhibit 19	E-mail - Subject: 360387 - Schaeper's Pharmacy Anda_Opioids_MDL_0000560415 through 560417	178
16	Exhibit 20	E-mail - Subject: Remedy - Control Requests Anda_Opioids_MDL_0000133286 and 133287	185
19	Exhibit 21	E-mail - Subject: acct# 206671 Anda_Opioids_MDL_0000109644 and 109654	193
21	Exhibit 22	E-mail - Subject: TPS # 457843 Anda_Opioids_MDL_000072179	197
22	Exhibit 23	E-mail - Subject: STATUS UPDATE: Collect Dispensing Data - Shared Accounts (Buying Groups) Anda_Opioids_MDL_0000554323	200
24			
25			

1	E X H I B I T S		
2	(Attached to the transcript)		
3	WILLIAMS DEPOSITION EXHIBITS		PAGE
4	Exhibit 24	E-mail - Subject: EPIC & IPA NJ- Required Information Anda_Opioids_MDL_0000708146 through 708148	206
5			
6	Exhibit 25	E-mail - Subject: Customer Questionnaire Meeting: Follow-Up Info Anda_Opioids_MDL_0000607225 and 607226	216
7			
8	Exhibit 26	E-mail - Subject: Control limit review for account 477066 Anda_Opioids_MDL_0000109496	222
9			
10	Exhibit 27	E-mail - Subject: CII Order: CHESTNUT AID PHARMACY, Ship To: 210320, Over the Limit, Status: Closed Anda_Opioids_MDL_0000283889 and 203890	227
11			
12	Exhibit 28	E-mail - Subject: Customer's Not Actively Purchasing Controls (July 12 thru Jan 13) Anda_Opioids_MDL_0000090024 and 90025	234
13			
14	Exhibit 29	E-mail - Subject: Accounts Shut Off From Controls This Week Anda_Opioids_MDL_0000711564 through 711567	236
15			
16	Exhibit 30	E-mail - Subject: 802433 - drug Store Columbus Ohio Anda_Opioids_MDL_0000070549 and 70550	244
17			
18	Exhibit 31	E-mail - Subject: Customer # 404255 Anda_Opioids_MDL_0000107989	247
19			
20	Exhibit 32	E-mail - Subject: LIMIT INCREASE ACCT 51180 Anda_Opioids_MDL_0000109372 through 109374	249
21			
22			
23			
24			
25			

1	E X H I B I T S		
2	(Attached to the transcript)		
3	WILLIAMS DEPOSITION EXHIBITS		PAGE
4	Exhibit 33	E-mail - Subject: React To Be Pulled from Remedy	258
5		Anda_Opioids_MDL_0000070803 and 70804	
6	Exhibit 34	E-mail - Subject: Keep Informed Status Completion on Opportunity for	262
7		COX PHARMACY #2 INC : 180217 :	
8		Control Limit Increase Order Pending	
9		Anda_Opioids_MDL_0000134040 through 1304042	
10	Exhibit 35	E-mail - Subject: (No subject)	266
11		Anda_Opioids_MDL_0000107933 and 107934	
12	Exhibit 36	E-mail - Subject: Pharmacy Sales-Data Required (Follow up)	269
13		Anda_Opioids_MDL_0000559434 through 559437	
14	Exhibit 37	E-mail - Subject: Know your customer (KYC) - Revised Form Attached	274
15		Anda_Opioids_MDL_0000622234 through 622236	
16	Exhibit 38	E-mail - Subject: Pill mills JDE @ 59213 BEST CARE PHARMACY INC	277
17		Anda_Opioids_MDL_0000622647 through 622649	
18	Exhibit 39	E-mail - Subject: Act 404329-Memorial Medical	281
19		Anda_Opioids_MDL_0000105787 through 105789	
20	Exhibit 40	E-mail - Subject: Exporters	287
21		Anda_Opioids_MDL_0000109029 and 109030	
22	Exhibit 41	Spreadsheets	293
23		Anda_Opioids_MDL_000109031 and 109039	
24		** NOT ATTACHED TO TRANSCRIPT **	
25			

1 - - -

2 THE VIDEOGRAPHER: We are now on the record.

3 My name is Anthony Barbaro. I am a videographer
4 for Golkow Litigation Services. Today's date is
5 December 13th, 2018, and the time is 9:22 a.m.

6 This video deposition is being held at
7 2 South Biscayne Boulevard, Suite 1900, Miami,
8 Florida, 33131, in the matter of Re: National
9 Prescription Opiate Litigation being heard before
10 the United States District Court, Northern
11 District of Ohio, Eastern Division.

12 The deponent today is Patricia Williams.
13 Counsel, would you please identify
14 yourselves for the record.

15 MS. RELKIN: Ellen Relkin from Weitz &
16 Luxenberg for the plaintiffs.

17 MR. STOLTZ: Adam Stoltz of Weitz &
18 Luxenberg for the plaintiffs.

19 MS. KOSKI: Katy Koski, Foley & Lardner, for
20 Anda, Inc., and the witness.

21 MS. LUND: Juli Ann Lund from Williams &
22 Connolly on behalf of Cardinal Health.

23 MR. LOMAX: Christopher Lomax from Jones Day
24 on behalf of Walmart.

25 MS. CARDENAS: Cristina Cardenas, Reed

1 Smith, on behalf of AmerisourceBergen.

2 MS. RELKIN: There are also two paralegals
3 from our firm. Do you want them to announce?

4 MS. KOSKI: That's okay. And on the phone,
5 can you please enter your appearances?

6 MS. YOCUM: Michelle Yocum from Covington
7 Burling on behalf of McKesson.

8 MR. HOUSTON: Zeno Houston, Arnold & Porter,
9 appearing on behalf of the Endo and Par
10 defendants.

11 THE VIDEOGRAPHER: The court reporter is
12 Susan Wasilewski, and she will now swear in the
13 witness.

14 THE COURT REPORTER: Ma'am, would you raise
15 your right hand?

16 Do you solemnly swear or affirm the
17 testimony you're about to give will be the truth,
18 the whole truth, and nothing but the truth?

19 THE WITNESS: I do.

20 THE COURT REPORTER: Thank you.

21 PATRICIA WILLIAMS, called as a witness by
22 the Plaintiffs, having been duly sworn, testified as
23 follows:

24 DIRECT EXAMINATION

25 BY MS. RELKIN:

1 Q. Okay.

2 A. Good morning.

3 Q. Good morning, Ms. Williams. We met off the
4 record. I'm Ellen Relkin. I'll be asking you some
5 questions today. I'm just going to go over some
6 basic rules before we get into the testimony.

7 First, it's important that you understand my
8 question. So if for any reason you don't, just tell
9 me and I'll be happy to rephrase it. If you want to
10 have the court reporter read the question back, she
11 can do that. It's kind of magical technology. It's
12 been around forever and it still works.

13 If you need a break for any reason, just let
14 us know.

15 A. Okay.

16 Q. It's assumed that if you answer the
17 question, you understand it. That's why if you
18 don't understand it, make sure you request a reread
19 or an explanation.

20 Also, I do have a tendency to pause while
21 I'm talking sometimes so -- and natural conversation
22 is often you know where the question is going so the
23 witness chimes in the answer before the question is
24 all out and then the record gets really messy.

25 A. Okay.

1 Q. So give a second for me to be done before
2 you answer.

3 A. Okay.

4 Q. And also this way your counsel can have time
5 to object if she chooses to.

6 All right. Are you on any medications that
7 would impact your ability to understand any
8 questions or give clear answers?

9 A. No.

10 Q. Okay. Have you ever given a deposition
11 before?

12 A. I'm not sure it would be called a
13 deposition. I actually went to a -- like a mini
14 trial or arbitration several years ago when I was in
15 Anda.

16 Q. What was that regarding?

17 A. It was regarding a noncompete agreement.

18 Q. Did it involve you as being -- as the person
19 at issue or you were just a witness?

20 A. No, I was just a witness.

21 Q. And what was the -- what was the noncompete?
22 It was between Anda and whom?

23 A. It was between a former employee who had
24 signed a noncompete and had gone to work for another
25 company.

1 Q. Who was that employee?

2 A. The name of that employee was Maria Alonzo.

3 Q. And what other company had she gone to?

4 A. I believe she went to Cardinal -- Cardinal,
5 I believe. I could be wrong. I don't recall
6 exactly. It was several years ago.

7 Q. Got it.

8 Now, you are no longer an employee of Anda;
9 is that correct?

10 A. That is correct.

11 Q. But are you being represented by counsel
12 here?

13 A. Yes, I am, by Katy.

14 Q. And how did you come to get called, to learn
15 about appearing today?

16 A. I received a call from the attorneys saying
17 that there was a --

18 MS. KOSKI: Wait. You can say you received
19 a call from the attorneys but don't discuss what
20 we discussed on the phone.

21 THE WITNESS: Okay. Okay.

22 BY MS. RELKIN:

23 Q. Are you being paid for your time today?

24 A. I'm not sure. I believe so.

25 Q. Okay. And for any time in preparation your

1 understanding is --

2 A. I'm sorry. Not for my time at the
3 deposition but the prep time, yes.

4 Q. And how much time did you spend in prep for
5 the deposition?

6 A. Probably about six-and-a-half to seven hours
7 yesterday, perhaps.

8 Q. So you met yesterday with counsel. Did you
9 meet any other days?

10 A. No.

11 Q. Okay. And besides meeting with Katy, were
12 there any other attorneys you met with?

13 A. Yes. The other gentleman, Matt, I believe
14 is his name. I forget his first name. It's Katy's
15 partner.

16 Q. And were there any other individuals in the
17 room?

18 A. No.

19 Q. Okay. Did you review documents yesterday?

20 A. There were a few documents, yes.

21 Q. And did they help to refresh your
22 recollection?

23 A. They did.

24 Q. Can you categorize what type of documents
25 you reviewed?

1 A. A few e-mails that had my name on it where I
2 had been copied, a couple e-mails that I had
3 written, and there was -- that was about it.

4 Q. Separate from what you reviewed yesterday,
5 were you provided any documents to review before
6 coming in yesterday for preparation?

7 A. No, ma'am. No.

8 Q. And about how many documents did you review?

9 A. Yesterday?

10 Q. Yes.

11 A. Perhaps ten, in total. I didn't count them
12 all.

13 Q. Did they help refresh your recollection?

14 A. Somewhat, uh-huh.

15 Q. Okay. So where do you work now?

16 A. Right now I work for a company called The
17 CORE Group.

18 Q. And is that in the food business, I
19 understand?

20 A. It is. It's a food broker. I work as a --
21 I work from home, and I do sales support for them.

22 Q. And your job before The CORE Group was at
23 Anda; is that right?

24 A. That is correct.

25 Q. Okay. We'll mark your résumé as the first

1 exhibit.

2 (Anda-Williams Exhibit 1 was marked for
3 identification.)

4 BY MS. RELKIN:

5 Q. I'm going to give you a copy of what we
6 marked.

7 MS. RELKIN: Of course, Counsel.

8 Sha'Huni, can you pass this to counsel on
9 the other side? Thank you.

10 BY MS. RELKIN:

11 Q. Ms. Williams, is this a true and accurate
12 copy of your CV?

13 A. Yes, ma'am.

14 MS. KOSKI: That was an example of wait
15 until she finishes the question before you
16 answer, just to help the court reporter out.

17 THE WITNESS: Oh, I'm sorry.

18 BY MS. RELKIN:

19 Q. And is it fair to say education-wise you
20 have -- you have a degree -- is that an associate's
21 degree at Valencia Community College?

22 A. I worked towards that degree. I never
23 officially finished. I was following the
24 curriculum.

25 Q. Understood. Okay.

1 So what does AA curriculum stand for?

2 A. Associate's of Arts.

3 Q. And you also indicate that SunTrust
4 University Management School. So what did you study
5 there?

6 A. SunTrust had a week-long management class
7 that they put upcoming managers and directors into
8 that hosted a variety of topics from dealing with
9 employees, HR issues, about the company, goals, how
10 to do performance reviews, you name it. It kind of
11 covered the gamut of things a manager would be
12 responsible for.

13 Q. And how long ago was that, approximately?

14 A. Let's see. I finished working for them in
15 2008. I attended that when I -- I would say it was
16 probably around 2000, 2001.

17 Q. So that was your -- your employment prior to
18 Anda? Was that a bank?

19 A. Correct.

20 Q. SunTrust Bank?

21 A. Correct.

22 Q. And they sent you to that course?

23 A. Yes.

24 Q. And then you also said host of supervisory
25 management and call center-related courses. That's

1 during your career?

2 A. Correct.

3 Q. So just focusing on your Anda time period,
4 what type of courses did you go to while you were at
5 Anda?

6 A. At Anda. While I was at Anda, we went to
7 two seminars -- two three-day seminars on two
8 different occasions that were call center-related,
9 having to do with productivity, measurements in call
10 centers, how to motivate and engage your employees.
11 It was a wide range of topics, and there were
12 options to attend varying segments throughout that
13 two- or three-day seminar.

14 So we picked topics. There were a number of
15 us that went from Sun -- from Anda, and we kind of
16 divvied those topics out and kind of blitzed it to
17 make sure we had an opportunity to maximize our time
18 there.

19 Q. And you shared what you learned with your
20 other coemployees?

21 A. Correct. Correct.

22 Q. Who else went to the course?

23 A. The other -- on different occasions -- I
24 remember that one of the very first seminars we went
25 to, Brian Witte was there. I remember that there

1 was, I believe, Paul Shermac was there. I remember
2 a member of our training team, Megan Talber, was
3 there, and there -- Anita Isabella who was over our
4 reporting area.

5 So there was a group of us that went.

6 Q. And this was just generic to call centers?
7 It was not specific to pharmaceutical industry? Is
8 that --

9 A. That is correct.

10 Q. Did you ever attend any courses while you
11 were at Anda about the pharmaceutical industry?

12 A. Courses -- not -- nothing -- that was
13 pertinent to call -- to call centers in a -- in a
14 pharmaceutical environment.

15 Is that what you're referring to?

16 Q. Well, not just call centers. Just while you
17 were at Anda did you go --

18 A. Pharmaceuticals period?

19 Q. Right.

20 A. Other than the training that I sat through,
21 which was the same training that the new hires went
22 through. I made sure that I attended all of that so
23 that I was very familiar with what the new hires
24 were experiencing in training. But nothing beyond
25 that, and I -- in terms of formal training, I did

1 have some time with members of varying departments
2 throughout the company, so I learned about the
3 pharmaceutical industry since I was obviously new to
4 that industry as a whole.

5 Q. So with regard to the training that the new
6 hires went through that you also sat in on, you
7 described it as formal training. Was it in a
8 classroom type of setting?

9 A. Yes, it was. Yes, it was.

10 Q. Does Anda have a classroom within their --

11 A. Yes, they do.

12 Q. -- building?

13 A. Yes, they do.

14 Q. Again, you answered before --

15 A. I apologize.

16 Q. -- because I paused for a second.

17 A. Okay.

18 Q. And who ran that training program?

19 A. The training manager.

20 Q. Who was that?

21 A. At the time, it was Megan Talber.

22 Q. Does she work off of some written
23 curriculum?

24 MS. KOSKI: Object to form.

25 THE WITNESS: I'm sorry?

1 MS. KOSKI: You can answer.

2 THE WITNESS: Oh, okay.

3 A. There was formal curriculum that was
4 available, yes.

5 Q. And you started at Anda in 2008. So is that
6 when you sat through the class?

7 A. That is correct.

8 Q. Did you sit through the class periodically
9 over later years?

10 A. I did.

11 Q. And how many occasions, about?

12 A. I would say probably three, maybe, for
13 varying topics that were being discussed.

14 Q. Okay. Do you recall any specific topics
15 where you came in over later years to sit in on the
16 program?

17 A. There were times when I came in and actually
18 talked to all the new hire classes concerning what
19 to expect, how the goals would be set up, what to
20 expect from their managers, what to expect from me,
21 what kinds of things that they might go to a manager
22 for versus coming to me for.

23 They -- it allowed them to answer questions.
24 Many of them had questions about the incentive
25 program or compensation questions and so forth. So

1 we were able to try to address those questions.

2 Q. You know, I will turn back to that in a
3 minute. I probably should -- just since I put your
4 résumé up, let me just for the record get the rest
5 of your background.

6 So when you were hired by Anda, it was in
7 2008?

8 A. Correct.

9 Q. What was the position you were hired for?

10 A. I was hired for the director of inside
11 sales.

12 Q. And what does inside sales mean?

13 A. Inside sales was a group of sales
14 representatives that were on the telephone, and they
15 were selling all day long. That was their job
16 responsibility. They were not out in the field.
17 They were inside in a cubicle in a -- what I would
18 call a typical call center environment, probably 8X8
19 or 6X6 -- I don't know the exact measurement -- with
20 monitors in front of them.

21 Q. And how many -- how many individuals were in
22 the inside sales group on the -- on the call center?

23 A. Okay. We had two different divisions. I
24 was responsible for the pharmacy division, and then
25 there was another gentleman who was responsible for

1 a division that we called Anda meds. That was the
2 division that sold to the physician side of the
3 business. You --

4 Q. What you sold the physicians, though, were
5 pharmaceutical products?

6 A. Pharmaceutical products, injectables, OTCs,
7 yes.

8 Q. You were about to say something. I cut you
9 off.

10 A. You had asked how many employees that I
11 personally had.

12 Q. Yes.

13 A. It did fluctuate. We were probably as low
14 as 60 -- 60, 65 at one point. We did get to be
15 close to 75, 76. So that number fluctuated as we
16 were bringing new hires in and people would
17 transition perhaps to other areas of the company.

18 Q. And that was in your division, the pharmacy
19 division?

20 A. That is correct.

21 Q. Was there any educational requirement for
22 the new hires?

23 A. They all needed to go through the new hire
24 training.

25 Q. But prior to that, did they need a high

1 school diploma? Did they need a college degree?

2 Were there any criteria for hiring a new hire?

3 MS. KOSKI: Object to form. You may answer.

4 A. Yes, they -- a high school diploma was
5 required; obviously, some college was preferred; and
6 some sales experience was preferred. However, we
7 did hire some folks without extensive sales
8 experience.

9 Q. Okay. Now let's go -- backing up with your
10 history, after you did some -- you did some
11 schooling at Valencia Community College?

12 A. Correct.

13 Q. How many -- how many semesters or courses?

14 A. I had not quite 60 credits.

15 Q. Is there any reason you didn't complete it?

16 A. Yes. I met my husband. My husband obtained
17 full-time custody of his six-year-old daughter. We
18 married, and I became a wife and a mom at the same
19 time and that was a full plate for me.

20 Q. Got it. Got it.

21 And then you went back to -- you went to the
22 workforce some years later?

23 A. I was working the entire time.

24 Q. So you were full-time mom and worked?

25 A. Correct.

1 Q. I can relate. We all can here, many of us.

2 Then you went to SunTrust Bank; is that
3 right?

4 A. That is correct.

5 Q. It looks like you had various jobs. Why
6 don't you -- I mean they are listed here on your
7 résumé. Your -- which was your first position?

8 A. The first position with SunTrust Bank was as
9 an operations analyst in the correspondent banking
10 department.

11 Q. And so did that have anything to do with
12 sales?

13 A. No.

14 Q. And obviously it had nothing to do with
15 pharmaceutical; is that right?

16 A. That is correct.

17 Q. And then you moved to what position?

18 A. Then I moved to a position which was under
19 the marketing umbrella. It was a new department
20 called relocation services. We worked with realtors
21 and area building builders and developers to market
22 a program to help target people that were moving to
23 the area, to the Orlando area. And we had a
24 relocation package that we mailed to them, and we
25 tried to secure their banking business before they

1 actually arrived to make their transition for home
2 buying that much easier.

3 Q. So when did you first get into the sales end
4 of SunTrust Bank?

5 MS. KOSKI: Object to form. Go ahead.

6 A. The sales role that I took on was first in
7 the relocation services department. We were
8 actually promoting this program to area realtors.

9 I had a number of sales reps that reported
10 to me. These folks happened to be outside sales
11 reps. These were not inside sales reps. And they
12 were out, and I would accompany them on sales calls
13 that they were doing to their realtors in their
14 market, promoting this program, setting up
15 opportunities for them to discuss this program with
16 members of their staff so that they understood how
17 the program worked.

18 It was a free service that we offered to the
19 realtors, and that was really my first kind of
20 exposure into the sales arena. Even though there
21 was not a cost involved in the sale, ultimately, I
22 became responsible for following up on those leads
23 and trying to sell banking services to those
24 individuals that we were targeting.

25 Q. And the term you used, inside/outside,

1 that's the same terminology that applies to Anda.

2 Is that a generic sales terminology? "Inside"

3 meaning phone calls from the inside versus "outside"

4 meaning meeting with potential clients or customers

5 outside? Is that fair to state? Or if not, you

6 tell me.

7 MS. KOSKI: Object to form.

8 A. Let me --

9 Q. Yeah.

10 A. Let me clarify my understanding.

11 Q. Let me have a cleaner question since I kind

12 of rambled there.

13 A. Okay.

14 Q. Can you explain your understanding of inside

15 sales versus outside sales?

16 A. Certainly.

17 Outside sales are individuals whose primary

18 job responsibilities are out in the field, wherever

19 that field -- whatever that level of responsibility

20 takes them.

21 Q. Right.

22 A. In this case, it was a realtor offices,

23 development offices, and so forth, builders, what

24 have you.

25 Inside sales, in my vernacular, is people

1 that are sitting inside, normally on a telephone,
2 making either inbound or getting and receiving
3 inbound calls or they are making outbound calls.

4 So there is even a distinction when you get
5 into the call center sales arena of inbound or
6 outbound, but outbound sales -- excuse me. Outside
7 sales normally means outside of the building.

8 Q. Got it.

9 And that's the same whether it was during
10 your function at SunTrust Bank and at Anda?

11 A. That is correct.

12 Q. And when you said there is even a
13 distinction within sales, there is the outgoing
14 calls and the inbound calls.

15 Of the number of employees that you
16 supervised in the -- I guess the phone bank, what
17 was the breakout of inside versus outside?

18 MS. KOSKI: Object to form.

19 BY MS. RELKIN:

20 Q. Excuse me, strike that.

21 What was the breakout of inbound calls
22 versus outbound calls?

23 A. While I worked for SunTrust?

24 Q. No, no. For Anda.

25 A. Oh, for Anda.

1 I would estimate that it was approximately
2 85 to 90 percent outbound and about 10 to 15 percent
3 inbound.

4 Q. And outbound means that these were sales
5 reps --

6 A. Sales reps.

7 Q. -- calling potential customers?

8 A. That is correct.

9 Q. Is that the same thing as cold call?

10 A. A cold call is when you are calling someone
11 who has had no prior dealings with the organization.
12 They have no account relationship with us, there was
13 no tie to the company, and a cold call was placed to
14 try to get them to eventually buy something from us.

15 Q. Right. Right.

16 So that would be part of the 85 percent
17 outbounds including cold calls?

18 A. Including cold calls.

19 Q. So what percent of the outbound was cold
20 calls?

21 A. That varied by individual, and if you will
22 allow me to explain.

23 New hires, when they were brought on board,
24 did almost exclusively 100 percent outbound calling
25 because they didn't have an established book of

1 business yet. They were calling on people that had
2 been in our database for years and had been called
3 for years, but the relationship had not turned into
4 an account relationship.

5 The larger that a sales rep's book of
6 business became, the more time they spent dealing
7 with their actual customers and clients and a little
8 less time on the outbound cold calling side.

9 I always highlighted to them the importance
10 of never stop cold calling because the moment you
11 stop cold calling is when your book of business
12 could dry up overnight. They could run into credit
13 issues. They could run into an issue where the
14 pharmacy closed. There were a number of reasons why
15 an account would stop buying from us.

16 So I told them it's important for them, to
17 be able to hit their goals, to always continue to do
18 some cold calling.

19 Some reps would only be ten calls a day
20 because that's all they had the time for. Others
21 would designate certain days of the week where they
22 would maybe designate their mornings. So it really
23 did vary by individual.

24 Q. All right. And then just to finish up your
25 résumé, the first exhibit.

1 Your last position at SunTrust Bank, what --
2 what did that entail?

3 A. My last position with SunTrust Bank was the
4 vice president slash -- and I did have two titles --
5 VP and customer service manager.

6 We had a group of employees there. We had
7 100-seat capacity, and we had roughly about 100 on
8 the customer service side that were under me. And,
9 again, that fluctuated sometimes between 90 to 110,
10 but I would say the 100 was around the average.

11 And then there was also a sales group that
12 was managed by another individual.

13 And the role of the group that I managed was
14 mainly inbound customer calls from SunTrust
15 customers.

16 Q. And I skipped that you were a sales manager
17 for the loan by phone department --

18 A. Correct.

19 Q. -- for the bank.

20 A. Correct.

21 Q. Did that involve outbound calls?

22 A. Yes. Some inbound and outbound.

23 Q. So the bank would call people saying --
24 trying to sell loans?

25 A. Correct.

1 Q. All right. We'll move on.

2 MS. KOSKI: We'll make a little pile in case
3 you want to go back to something.

4 THE WITNESS: Okay.

5 Can I just add something? Is it --

6 MS. KOSKI: No. You've got to wait for a
7 question. Thanks.

8 THE WITNESS: Okay. All right.

9 BY MS. RELKIN:

10 Q. What was the circumstance of you leaving
11 Anda?

12 A. I was called into a meeting on a Monday
13 morning with Chip Phillips; with Karen Martin, who
14 was the -- over HR at that location; and Tom
15 Pflepsen. And Chip conducted the meeting. He told
16 me that a restructuring was going on within the
17 company and that my position was being eliminated
18 and that he was going to be taking over the sales
19 floor.

20 Q. That was Chip Phillips?

21 A. Correct.

22 Q. Did that coincide with Anda being acquired
23 by another company?

24 A. We had not been acquired by another company
25 at that time. We were still under Allergan at that

1 time.

2 Q. Okay. And when you were first hired by

3 Anda, it was Watson?

4 A. That is correct.

5 Q. And was your -- were you employed by Watson

6 as opposed to Anda or did you --

7 A. Correct.

8 Q. It was Anda?

9 A. (Nodding head.)

10 Q. Your paychecks came from a payroll check

11 that said Anda?

12 A. Correct.

13 Q. What was your understanding of the

14 relationship with Watson?

15 MS. KOSKI: Object to form. You can answer.

16 A. Okay. My understanding of it was that

17 Watson was the owner, the -- of the wholly owned

18 subsidiary of Anda. They were a manufacturer.

19 However, we were a distributor.

20 Q. And you distributed -- strike that.

21 Anda distributed Watson's generic products;

22 is that correct?

23 A. That is correct.

24 Q. Watson was a generic manufacturer; is that

25 right?

1 A. They -- they did both, correct. They had
2 some brand items, and they had some generic items.

3 Q. And they made opioid products; is that
4 right?

5 A. That is my understanding, yes.

6 Q. Do you recall which opioid products Watson
7 made?

8 A. I don't recall at that time, no.

9 Q. Part of your responsibility was to direct
10 the sales force to sell opioid products made by
11 Watson; is that fair to state?

12 MS. KOSKI: Object to form.

13 A. I'd like to reclarify that statement,
14 because when we say "sell opioids," CIIs, which are
15 known as opioids, were not able to be keyed -- an
16 order could not be keyed by a sales rep. There was
17 another process.

18 Q. But to begin the process, to find a customer
19 who was interested in buying it, there were efforts
20 made by your sales force to contact pharmacies to
21 see if they were interested, understanding it still
22 had to go through some approval process; is that
23 right?

24 A. That is -- that is correct. However, when
25 we were approaching a customer about ordering and

1 dealing with us as a customer, it was for all their
2 generic needs. It was not strictly for the opioids.

3 Q. Is it your testimony that there were never
4 phone calls that were directed specifically to
5 promoting certain opioid products during certain
6 campaigns?

7 MS. KOSKI: Object to form. You may answer.

8 A. There were some campaigns, for instance,
9 from -- on new launches of a new CII product where a
10 call would be placed specifically to educate the
11 customer that that product was now available.

12 Q. And did it also educate the customer that
13 there were certain sales incentives, whether it was
14 coupons or discounts?

15 MS. KOSKI: Object to form.

16 A. We really didn't have anything in -- in
17 terms of coupons or incentives of that kind on a --
18 on a new market launch like that, normally, the
19 product comes out, and the role of the sales rep is
20 to educate the customer on what the product is and
21 what's available.

22 Q. Educate and to try to get their purchase?

23 A. And to try to get their purchase if they
24 qualified, if there was a need.

25 Q. And separate from the new launch, there also

1 were certain promotional efforts to promote certain
2 CII products where discounts were given; isn't that
3 fair to state?

4 MS. KOSKI: Object to form.

5 A. Can you clarify what you mean by discounts?

6 Q. Ten percent off, certain promotional
7 pricing.

8 A. I know that we had some -- I know that we
9 had some marketing -- what we called marketing
10 drivers that we utilized outbound calling for -- to
11 encourage customers to use CSOS for their CII
12 ordering, but I don't remember them having a
13 discount -- at a discounted rate. It could have
14 been, but I don't recall.

15 Q. And why don't you just describe what CSOS
16 is.

17 A. CSOS is -- it stands for controlled
18 substance ordering system, and it is a platform that
19 allows pharmacies to place their controlled
20 substance orders, mainly CIIs, directly through a
21 computer rather than using a paper CII form.

22 Q. And marketing driver, what is that?

23 A. Marketing driver was one of the elements of
24 our sales reps' monthly score card. The score card
25 was meant to measure the entire performance of the

1 sales rep; not just the calls, but how long they
2 were on the phone, how many customers that they sold
3 to, whether they hit their generic goal for that
4 month.

5 And a marketing driver was introduced
6 through our marketing department for various
7 initiatives that the company wanted to use the sales
8 force to promote.

9 Q. What percentage of time did the sales force
10 devote to calls involving CIIs as compared to other
11 pharmaceutical products? Did marketing driver or
12 any part of the sales report break that out?

13 MS. KOSKI: Object to form.

14 A. There was no measurement of that to my
15 recollection. That was a very, very, very small
16 percentage of times that were dedicated to that, any
17 kind of a CII initiative.

18 Our main focus was overall generics. We
19 stocked over 11,000 SKUs of generic products. That
20 was our business.

21 Q. Of which some were opioids?

22 A. Of which some were, correct.

23 Q. And the profit margin on the CIIs was a
24 favorable profit margin, wasn't it?

25 A. I cannot speak to that. I had nothing to do

1 with pricing, nor involved in that.

2 Q. During the various training programs that
3 took place in that special training room, did you
4 ever attend or come to learn of training where the
5 sales force or anyone else was educated about the
6 different CII products?

7 MS. KOSKI: Object to form.

8 A. Yes.

9 Q. And what -- describe for me as best as you
10 can recall what was said at those meetings.

11 MS. KOSKI: Object to form.

12 A. There was a complete training on -- on CIIs,
13 who we sold to, who we didn't sell to, the different
14 types of control products, what the process was if a
15 customer wanted to order one.

16 We were real -- on the CII side, it was
17 really a service we provided because our sales reps
18 were not able to key those orders in. The customer
19 had to fill out a form, send it to us, and the sales
20 floor did not touch that order. It was handled by
21 another member of my department with different
22 access to enter that CII order into our TPS ordering
23 system.

24 Q. Who was that?

25 A. Latoya Samuels was the person who

1 predominantly had that responsibility.

2 Q. But before it went to Latoya Samuels, a
3 salesperson was interacting with the pharmacy
4 customer, discussing the sale of CII products,
5 correct?

6 A. They could have been, or it could have been
7 that the customer had the CII form already, filled
8 it out, and just sent it in to our warehouse; the
9 sales rep did not touch that order.

10 Q. Well, sales reps did touch some of the
11 orders.

12 What do you mean by "touch" an order?

13 A. "Touch" -- okay. What I mean by that, they
14 did not key the order into the system.

15 Q. Just with their hands, they did not enter
16 it?

17 A. They did not, correct.

18 Q. But they still had communications with their
19 customer about it?

20 A. Correct. They would see that an order had
21 been processed.

22 Q. Who -- who led that training program which
23 discussed the CIIs?

24 MS. KOSKI: Object to form.

25 A. I don't recall specifically who conducted

1 all of the sessions. I do remember that our
2 compliance department attended and was there most --
3 for most of those trainings. I can't say they were
4 there for all of them because I did not personally
5 attend all of those, but they were there at the ones
6 that I was there.

7 Megan, again, was our trainer, and she, with
8 the compliance department, had put training together
9 to make sure that our new hires and the entire floor
10 knew what our processes were.

11 Q. Do you know whether Megan is still with the
12 company?

13 A. She is not.

14 Q. Do you know where she is now?

15 A. North Carolina, I believe.

16 Q. Do you know -- do you stay in touch with
17 her?

18 A. Occasionally.

19 Q. Where in North Carolina?

20 A. I don't know the actual city.

21 Q. And I think we have her last name on the
22 record, but what is it again?

23 A. Talber.

24 Q. And who does she work for now?

25 A. I believe she's a stay-at-home mom, and she

1 homeschools her children.

2 Q. Do you have Facebook communications with
3 her?

4 A. Occasionally. Occasionally.

5 Q. What other former coemployees are you still
6 in touch with?

7 MS. KOSKI: Object to form.

8 A. Former employees?

9 Q. Anyone you worked with.

10 A. There is a couple of sales managers.

11 Q. Who are they?

12 A. Vickie Shalley. Vickie Shalley-Held was
13 actually her hyphenated last name.

14 Q. Where is she now?

15 A. She is now a realtor.

16 Q. Where?

17 A. Better Homes and Garden Realty -- Better
18 Homes and Garden Real Estate. I believe it's in
19 Plantation.

20 Q. Florida? Florida, right?

21 A. Correct.

22 Q. Anyone else besides Vickie?

23 A. When you -- can you clarify what you mean by
24 stay in touch with?

25 Q. Send a Christmas card --

1 A. Oh.

2 Q. -- speak to them intermittently, ever get
3 together intermittently, send an e-mail, Facebook
4 hellos.

5 A. Every once in a while Vickie and I will chat
6 or I'll respond to something on Facebook. Is it
7 every day, no.

8 Q. Besides Vickie, from the date you left Anda,
9 did you ever get together physically with any of
10 your former coworkers?

11 A. Yes. I've gotten together with a couple:
12 my former boss, who was Kim Poropat.

13 Q. Is she still there?

14 A. No.

15 Q. Where did she go?

16 A. I don't believe she's working.

17 Q. Did she leave around the same time you left?

18 A. No. She left maybe a year, year-and-a-half
19 later.

20 Q. Do you know the circumstance of her leaving?

21 A. I do not.

22 Q. Besides -- besides Kim Poropat, anyone
23 else? Vickie and Kim. Who else?

24 A. That's --

25 Q. Those are the only two people?

1 A. Megan every once in a while, but nobody on a
2 regular basis.

3 Q. The training sessions you said compliance
4 attended -- these are the training sessions
5 regarding the CII opioid products -- did compliance
6 speak at the program?

7 A. Yes.

8 Q. So when I heard "attendance," it seemed to
9 me like more like they were in the audience, but
10 they were part of the presentation?

11 A. They were -- they were -- they were there,
12 uh-huh.

13 Q. So who spoke at the program?

14 A. I recall Robert Brown speaking.

15 Q. And how regular were these programs? Was it
16 an annual thing or some other periodic basis?

17 A. I don't remember that there was a set
18 schedule. If we felt a refresher was needed, we
19 would go back and conduct a refresher. That was
20 part of our ongoing business and protocol with
21 anything that we felt the floor needed a refresher
22 on.

23 Q. Did -- besides Robert Brown presenting, who
24 else presented? Megan and Robert Brown and who
25 else?

1 A. I -- I believe at the session that I was at,
2 that I believe Emily Schultz was at as well, and
3 I -- I remember Mike Cochrane being there for a
4 short time, but I don't -- I cannot remember whether
5 he was there for the entire program.

6 Q. How long was the program?

7 A. I don't recall. It was probably close to an
8 hour.

9 Q. And were there handouts?

10 A. I don't recall if there were handouts, but I
11 know we had screens and there were overheads that
12 were used for all of the -- it was an entire, like,
13 PowerPoint presentation that was put together.

14 Q. Thank you.

15 MS. RELKIN: Speaking of screens, this
16 screen is not on. Is there a way to put that on
17 so everybody else can get the benefit of looking
18 at the exhibits?

19 THE VIDEOGRAPHER: They have the monitors
20 there.

21 MS. RELKIN: Oh, you all can see it? Okay.

22 BY MS. RELKIN:

23 Q. So there were PowerPoint slides?

24 A. (Nodding head.)

25 Q. Since you've been to more than one of them,

1 did they look like repeat slides, some of them, some
2 maybe new ones?

3 MS. KOSKI: Object to form.

4 A. I can't answer that. They looked all
5 uniform.

6 MS. RELKIN: I call for production of the
7 training slide PowerPoints. We'll obviously
8 follow up.

9 BY MS. RELKIN:

10 Q. Was there any discussion of the addictive
11 nature of CII pharmaceutical products during the
12 program?

13 MS. KOSKI: Object to form.

14 A. I believe it was discussed. I just can't
15 say how much time was spent on it.

16 Q. What do you recall being discussed?

17 A. I recall being discussed who we could sell
18 to, who we could not sell to, the different levels
19 of products that were out there and the different
20 C -- well, there is a CII category, there's a CIII,
21 there's CIV.

22 But CII was really the opioids, so this was
23 really all-inclusive of mainly CIIIs.

24 Q. And what do you recall being instructed
25 about who you could not sell to?

1 A. Physicians. We didn't sell to physicians.
2 We didn't sell to wholesalers. We didn't sell to
3 pain management clinics. We didn't sell to diet
4 clinics. There might have been some reference to
5 repackagers. Repackagers are people that take a
6 product and then repackage it. I believe that was
7 the context of it.

8 Q. Why were those category of potential
9 customers off-limits?

10 MS. KOSKI: Object to form.

11 A. That was a decision made by the management
12 team.

13 Q. Did you have any understanding why you could
14 not sell to them?

15 A. My understanding, that was a decision that
16 was made by the management team, that we were not
17 going to sell to physicians.

18 Q. But did you have an understanding of why
19 they did not want or they decided not to sell to
20 physicians? Did it have something to do with --

21 A. I'm --

22 MS. KOSKI: Let her finish.

23 BY MS. RELKIN:

24 Q. -- risk of diversion?

25 MS. KOSKI: Object to form.

1 BY MS. RELKIN:

2 Q. Strike that.

3 Sitting here, are you saying you have no
4 understanding whatsoever of the basis for why a
5 decision was made not to sell to physicians?

6 MS. KOSKI: Object to form.

7 A. I was not part of the discussion that went
8 on as to why the physicians were not going to be
9 sold to. We were all aware as an organization and
10 individuals. We read the papers. We knew what was
11 going on. And it was no surprise when that decision
12 was made, that we were not going to be selling to
13 them. This was not our livelihood. This was not
14 what we came to work to do every day, was
15 concentrate on CII sales. We came to sell generic
16 products, and that's -- that was the focus of our
17 business. This was a very small subset of what our
18 sales reps sold.

19 Q. And when you say you knew what was going on,
20 you read the papers, are you talking about opioid
21 addiction?

22 A. Correct.

23 Q. And are you talking about pill mills?

24 A. Correct.

25 MS. KOSKI: Object to form.

1 BY MS. RELKIN:

2 Q. And what was your understanding of what a
3 pill mill is?

4 A. Our understanding of a pill mill was
5 physicians that were really doing some very
6 questionable things and that were in essence
7 creating lines of people waiting to get products
8 that -- or scripts for products from a physician
9 that was possibly doing unethical things.

10 Q. And that there were patients or individuals
11 who were addicted who were searching out for --

12 A. Searching out, correct.

13 Q. -- for prescriptions?

14 A. Correct. Correct.

15 Q. You said a decision was made not to sell to
16 physicians. At some point prior to that, sales of
17 CII were made by Anda to physicians; is that right?

18 MS. KOSKI: Object to form.

19 A. My understanding is that yes.

20 Again, I didn't manage that side of the --
21 that side of the business.

22 Q. So your side of the business was --

23 A. Pharmacies.

24 Q. -- strictly pharmacies?

25 A. Independent pharmacies. We didn't deal with

1 the Walgreens or the CVSs or the larger chains.

2 Those were all handled through our national account
3 team.

4 Q. Vickie Mangus and others?

5 A. That is correct.

6 MS. KOSKI: Sorry, I hate to do this. Can
7 we take a quick break?

8 MS. RELKIN: Sure.

9 THE VIDEOGRAPHER: Off the record at 10:07.

10 (Recess from 10:07 a.m. until 10:16 a.m.)

11 THE VIDEOGRAPHER: The time is 10:16 a.m.

12 We're now back on the video record.

13 (Anda-Williams Exhibit 2 was marked for
14 identification.)

15 MS. KOSKI: Is this the one you want the
16 witness to have?

17 MS. RELKIN: Oh, yeah. There should be an
18 extra one there for you.

19 MS. LUND: Can we put one on the Elmo maybe?

20 MS. RELKIN: Yeah. Which is the way to zoom
21 in?

22 THE VIDEOGRAPHER: I gotcha here. Do you
23 want to zoom in or zoom out?

24 MS. RELKIN: Make it a little easier to
25 read, bigger.

1 Can anybody read that? It's small, so --
2 okay.

3 MS. KOSKI: She needs to see it if she
4 highlights something. So I --

5 BY MS. RELKIN:

6 Q. Ms. Williams, I show you what we just marked
7 as Exhibit 2, which look to be PowerPoint slides
8 titled "Controlled Substances, Know Your Customer."

9 Is this the slides that you were describing
10 that were shown at the training session?

11 A. Yes.

12 Q. Okay. And the term "know your customers,"
13 is that a term in the industry regarding the sale of
14 CII substances to pharmacies?

15 MS. KOSKI: Object to form.

16 A. Yes.

17 Q. Is that also a term used for pharmacies
18 for -- for their customers, the individual patients
19 bringing in scripts?

20 A. I can't answer what the pharmacy lingo is,
21 but it was part of our pharmacy lingo.

22 Q. And your understanding was that meant that
23 Anda employees should know their customers, the
24 individual pharmacies?

25 A. Do their best, yes.

1 Q. Okay. And the purpose of that was -- was
2 what?

3 MS. KOSKI: Object to form.

4 A. The purpose of understanding -- of knowing
5 the customer?

6 Q. Yes.

7 A. To know about them, to know what kinds of
8 clients that they sold to, what was the market that
9 they were in.

10 Part of our role as sales reps was to be a
11 consultant to them, not just call them and read
12 specials off for the day. It was to understand
13 their business and how we could partner with them as
14 a business partner to meet their needs.

15 Q. Was your understanding that "know your
16 customer" was something targeted to the CIIs to make
17 sure that you knew what your customer with the
18 pharmacy was doing with the product?

19 MS. KOSKI: Object to form.

20 A. It was part of getting to know the entire
21 customer, no matter what they bought from us. We
22 still wanted to know who they were, what did their
23 storefront look like. We would Google search their
24 location to determine where were they, what kind of
25 a market were they serving. We wanted to know as

1 much about them as we possibly could. How long they
2 were in business, who their primary was.

3 We -- we -- Anda was never desirous of being
4 the primary for our independent pharmacies. We'd
5 like to be their primary secondary. That was the
6 goal.

7 Q. But the title of this presentation,
8 "Controlled Substances" -- it would help if I had
9 the cap off -- "Know Your Customer" -- so while
10 generally it makes sense that you are selling
11 something, whatever the product is, you want to know
12 your customer, it makes you a better salesperson --

13 A. Right.

14 Q. -- makes you more helpful to them, here,
15 there was a focus on "know your customer" with
16 regard to controlled substances; fair to state?

17 A. Yes.

18 Q. And that's because you wanted to make sure
19 it wasn't a fly-by-night operation that was
20 operating virtually out of a truck?

21 A. Right.

22 MS. KOSKI: Object to form.

23 Q. Right?

24 That's why you wanted photographs of where
25 they were; is that right?

1 A. Uh-huh.

2 MS. KOSKI: You have to give a verbal
3 answer.

4 A. Yes.

5 Q. I neglected to give you that instruction.

6 Even though a nod of the head or "uh-huh" is
7 what we do in ordinary conversation, the court
8 reporter needs an oral answer.

9 Okay?

10 A. Yes.

11 Q. Thank you. You got it.

12 All right. One of the topics here was
13 "Increases and Control Limit Increases and
14 Corrective Adjustments"; is that right?

15 In terms of the module overview --

16 MS. KOSKI: If you look on the screen, you
17 can see what she's talking about.

18 BY MS. RELKIN:

19 Q. I'm sorry. It's the second slide.

20 A. Okay. Yes.

21 Q. And that was something that was important to
22 your staff, right?

23 A. Right.

24 Q. And we'll go over some of the documents
25 regarding that.

1 MS. KOSKI: It is the same as the one in
2 front of you.

3 THE WITNESS: Uh-huh.

4 MS. KOSKI: Yeah.

5 BY MS. RELKIN:

6 Q. I'm not going to go through the whole slide.
7 I just want to touch on a few things.

8 The slides took you through the overall
9 eligibility requirements, right, in terms of whether
10 a customer was even eligible to buy the CII
11 products?

12 A. Correct.

13 Q. Is that fair to state?

14 A. Yes.

15 Q. And there is a compliance department as we
16 discussed, right?

17 A. (Nodding head.)

18 Q. But before compliance dealt with a customer,
19 the sales force was -- the beginning of the contact
20 with the customer; is that fair to state?

21 MS. KOSKI: Object to form.

22 A. Correct.

23 Q. Which is why sales needed to know at least
24 some of these basics, if not more, of dealing with
25 controlled substances before it even got to

1 compliance?

2 A. That is correct.

3 Q. In terms of the notion of "know your
4 customer," are you familiar with the concept that
5 the sales force should be the eyes and ears of the
6 company since they were more directly interacting
7 with the customer?

8 MS. KOSKI: Object to form.

9 A. Could you restate the question?

10 Q. Have you heard the term "eyes and ear of the
11 company"?

12 A. Correct.

13 Q. And what's your understanding of that in
14 this context?

15 A. In the context of this particular module?

16 Q. Yeah.

17 A. Yeah.

18 Q. So this issue, yeah.

19 A. Okay. To help us understand what's going
20 on, what they are hearing from their customers, what
21 are their customers hearing, what -- what our sales
22 managers were hearing from the clients that they
23 spoke to.

24 Because sometimes if there was a question,
25 the sales rep would escalate the call to the sales

1 rep -- from the sales rep to the sales manager,
2 excuse me. So it means being alert. Being -- being
3 alert to things that the company may need to know
4 about.

5 Q. Including whether there was something
6 suspicious about the potential customer?

7 A. Correct.

8 MS. KOSKI: Object to form.

9 BY MS. RELKIN:

10 Q. Okay. What are some of the concerns that
11 might trigger a sales rep to notify their sales
12 manager or compliance about concerns about a
13 customer in the context of CII sales?

14 MS. KOSKI: Object to form.

15 A. In the context of CII sales, if they -- if
16 they saw changes in the patterns of the customer
17 ordering, they would see those -- those orders
18 coming through, they don't -- as we talked earlier,
19 they don't -- they didn't key them, but if they saw
20 unusual patterns, they normally would inquire what
21 was going on.

22 Sometimes there was a national account
23 initiative that was driving that. Other times it
24 could have been the customer that was just -- they
25 were approved, but they hadn't been buying the

1 controls and then they started buying the controls
2 from us.

3 There could have been a variety of reasons
4 why they would have seen a change.

5 Q. And change in pattern, would that include an
6 appreciable increase in the volume of opioids that
7 were being requested for purchase?

8 A. Correct.

9 Q. And did it also include within the opioid
10 family if there was a surge in OxyContin or
11 fentanyl, that that would trigger concerns?

12 MS. KOSKI: Object to form.

13 A. Yes, I think that would fall in that same
14 category of any CII that was -- any pattern that was
15 outside of the customer's normal realm was something
16 we talked to them about making us aware of.

17 Q. And when it was a new customer, so you
18 didn't know what their normal realm was, what were
19 your sales reps instructed to look for?

20 MS. KOSKI: Object to form.

21 A. We did not sell CIIIs to brand new
22 customers until they had several months' worth of
23 history. We needed to know a little bit more about
24 the pattern of their business before we would send
25 the request to the compliance department to see if

1 they would turn on control purchases.

2 Q. So if a new customer called that was -- you
3 had never sold to before and they were a pharmacy
4 in -- pick a place, somewhere in Ohio -- that never
5 sold -- you never sold to them before, what was
6 required to do before you could provide them with
7 the CII product?

8 A. We normally had -- we requested that they
9 complete a questionnaire so that we could get to
10 know more about their business. That questionnaire
11 was sent with the new account package that was
12 mailed out by the marketing department. The sales
13 rep would request that packet get mailed from
14 marketing. Marketing would send that packet out and
15 the know your customer -- I'm sorry, the question
16 your customer questionnaire was included in that
17 packet.

18 They would return that information back to
19 us, and we would get a copy of their DEA license and
20 their state license before we would be able to even
21 start the process of trying to open an account. The
22 new account process itself was several steps.

23 Q. And would you get the DEA and state license
24 from them?

25 A. We would get the DEA and state license from

1 the pharmacy that was asking to open an account with
2 us, yes.

3 Q. Okay. And then what?

4 MS. KOSKI: Object to form.

5 A. In terms of what the next step in the new
6 account process would be?

7 Q. Yes.

8 A. Okay. The sales rep would obtain those
9 documents, something called a load sheet was
10 completed by the sales rep that was putting all the
11 pertinent information that was required in our
12 system to load a new customer. That was put on a
13 form and it was sent to our customer maintenance
14 department and to the compliance department with a
15 copy of the DEA license and the state license.

16 Q. Okay. And then what was the next step?

17 A. Then we waited.

18 Q. For?

19 A. We had to wait for customer maintenance to
20 load all that information into the system as a new
21 record, and then it was compliance would do the
22 ultimate verification and approval to open up that
23 account.

24 Q. Was there any minimum waiting period?

25 MS. KOSKI: Object to form.

1 A. To open the account and start buying, once
2 the account was open, they could start purchasing
3 right away, but not CIIs. Typically not CIIs.

4 Typically we would get -- we would wait at
5 least 90 days, if not longer, and we did not offer
6 that. It was not something that we were -- it was
7 part of the sales rep's presentation as soon as a
8 new account opened to, oh, we can sell you CIIs.

9 It was really designed to open the account
10 so that we could get them to start buying generic
11 products from us.

12 Q. So there never were situations where a sales
13 rep made a cold call to a pharmacy and said, yes, we
14 could use some oxy or some other CII and then steps
15 would be taken to get it to them?

16 MS. KOSKI: Object to form.

17 BY MS. RELKIN:

18 Q. Is that your testimony?

19 A. That would have been a red flag, and that's
20 the way the reps were trained. And that was even
21 touched on in this, even though it wasn't in
22 writing. If you're getting a call out of the blue
23 from a customer who you've never -- who we've never
24 dealt with before and that's what their first
25 question to you is, that's a big red flag.

1 Q. What if it went the other way? Were there
2 sales reps from Anda who, in their tasks, the
3 younger rookies who were making cold calls to get
4 new business, did they ever make cold calls to
5 pharmacies offering CIIs during these initial
6 overtures to the new company?

7 MS. KOSKI: Object to form.

8 A. That was not how they were trained.

9 Q. Do you recall that ever occurring?

10 A. I do not recall ever hearing it. Since I
11 didn't hear every call that the sales reps made, I
12 can't vouch for every single call.

13 Q. By the way, with regard to the calls that
14 the sales reps made, were they monitored or audited?

15 A. Yes, they were.

16 Q. What was the process for that?

17 A. We used a system called Call Copy. Call
18 Copy is a software program -- a monitoring software
19 program where calls are recorded, and we had a QA
20 department, quality assurance department, that fell
21 under the training umbrella.

22 Q. And what percentage -- strike that.

23 Were all of the calls recorded?

24 A. I can't say that they were all recorded
25 because, by law, there were a couple customers that

1 had requested not to be mon -- to be recorded, and
2 by law we had to comply with that. But I would say
3 a good 85 to 90 percent of the calls were recorded.

4 Q. And was that the salesperson, when they
5 picked up the phone, they pushed a button to record,
6 or how did that work?

7 A. It worked automatically, and they had to
8 have a certain greeting that they had to use to
9 disclose to the customer that they were on a
10 recorded line. So their greeting would be: Hello,
11 this is Patricia Williams. I'm calling you today on
12 a recorded line. Either how can I help you or can
13 we talk a little bit about your business today.

14 Q. Got it. If a customer said I don't want
15 this to be recorded, was that a red flag to you?

16 A. A red flag? It was not a red flag from the
17 standpoint of, oh, I wonder why. It was a -- it was
18 just that we, legally, based on all the research
19 that had been done on the topic of recording, we
20 knew that we needed to take that next step and we
21 needed to be able to comply with that.

22 So it was more of a legal requirement that
23 we were obligated to follow.

24 Q. But there was no concern that if a customer
25 was touchy about having the call recorded, that they

1 may have been seeking CIIs inappropriately?

2 A. Not -- no, I don't recall that really being
3 of a big concern. The sales reps would try to
4 educate the client or the customer as to why we did
5 that. It was for their coaching and development.

6 Just because you have a sales rep doesn't
7 mean that they are the perfect salesperson. So we
8 were constantly coaching, monitoring, developing,
9 getting feedback from QA, going back to the sales
10 rep, saying, okay, you've positioned it this way; it
11 would have been better to maybe have positioned it a
12 different way.

13 You know, they weren't perfect people, and
14 we did our best to try to make them as professional
15 as we possibly could.

16 Q. If there were -- if QA folks who were
17 monitoring the calls thought that there was
18 something inappropriate in which the reps were
19 conducting the calls, especially with regard to
20 CIIs, were they ever terminated?

21 MS. KOSKI: Object to form.

22 A. Was the employee ever terminated?

23 Q. Yes.

24 A. It would depend on what the context of the
25 call was. Mainly, we used the coaching and feedback

1 as -- we used the tool of the QA feedback as helping
2 them to become better. Maybe the way they said it
3 was technically -- technically right, but the way
4 they said it may have led the customer to have a
5 little bit different impression than what they
6 should have had. And we would go back and help them
7 to rephrase that and fine-tune their sales pitch.

8 Q. As you sit here, can you recall any
9 situations where an employee was terminated by Anda
10 because of inappropriate efforts to sell opioids to
11 customers?

12 MS. KOSKI: Object to form.

13 A. I cannot recall.

14 Q. Sitting here, can you recall any employees
15 who were disciplined or schooled due to QA people or
16 others seeing that they were doing something
17 inappropriate in their efforts to sell CII opioids
18 to customers?

19 MS. KOSKI: Object to form.

20 A. Yes, I believe they were.

21 Q. Can you tell me about what you recall?

22 A. I -- I recall that we had a few reps that
23 just were not positioning our -- our position as a
24 company correctly.

25 When decisions were made to cut off a

1 customer from buying controlled substances, the way
2 that they explained that to the customer may not
3 have been as professional as it should have been or
4 it may have led the customer to believe well, if I
5 do this, I can do this, kind of thing. So when we
6 caught that, we sat down. We sat with the rep. We
7 coached them through a different kind of dialogue to
8 have.

9 I can remember some of the sales managers
10 having those conversations with them over a period
11 of time. Do I remember a specific rep? No, but I
12 know that those kinds of conversations and coaching
13 development opportunities did go on.

14 Q. You can't recall any particular rep who was
15 disciplined for their --

16 A. I cannot as I'm sitting here, no.

17 Q. And let me just finish the question.

18 A. I'm sorry.

19 Q. You can't recall as you're sitting here any
20 individual rep -- sales rep who was disciplined by
21 Anda management for inappropriate conduct in
22 promoting or selling opioids to pharmacy customers?

23 A. I cannot recall.

24 Q. When you left the company, were you provided
25 with any severance?

1 A. Yes.

2 Q. And was that a package that they offered to
3 you?

4 A. Yes.

5 Q. Was that offered to you during that same day
6 when you had the meeting when you learned that your
7 position was being -- what's the terminology -- the
8 position was eliminated?

9 A. I was notified that there would be something
10 forthcoming, but I did not get it that day.

11 Q. How soon afterwards did you get it?

12 A. I actually got the package about two months
13 later.

14 Q. Was there any intervention in between where
15 you sought counsel against the company?

16 MS. KOSKI: Object to form.

17 A. No.

18 Q. Would you -- would you describe your leaving
19 the company to be that you left on good terms?

20 A. Yes.

21 Q. Do you have any pension with Anda or any of
22 its owners?

23 A. No, ma'am.

24 Q. Did they have a pension plan?

25 A. No. They had a 401(k).

1 Q. Who did you report to, starting -- it may
2 have changed over time -- so when you joined the
3 company? Was that in 2008?

4 A. Yes. I joined August the 4th, 2008. At
5 that time, I reported to Kim Bloom. Her name is now
6 Kim Poropat. She reverted back to her maiden name
7 after a divorce. And I reported to her for
8 approximately a year, year-and-a-half.

9 Q. Okay. And then?

10 A. And then I was promoted to executive
11 director of sale -- of inside sales. Kim
12 transitioned to another role within the organization
13 and I started reporting to a Brian Witte, W-i-t-t-e.
14 And I remained reporting to Brian until the day that
15 I left.

16 Q. Your compensation, was there a base pay and
17 a commission component?

18 A. My base pay was -- there was a base, and
19 then there was an annual percentage component. If
20 the company made plan, there were a number of
21 factors that had to have been met, and it could have
22 been up to 20 percent of my annual income if all of
23 those factors aligned.

24 Q. Was that based by any metrics of sales from
25 your unit?

1 A. Yes, it was.

2 Q. What was the ratio between -- understanding
3 that your commission could change over time, because
4 it wasn't always the same --

5 A. Correct. I was not a commission-based sales
6 manager or director. I was paid a salary. I did
7 not get commission on sales.

8 Q. Okay. So what -- what would you refer to --
9 we know the base pay is the regular.

10 A. Correct.

11 Q. And then this --

12 A. It was an annual bonus.

13 Q. It was a bonus?

14 A. Correct. It was an annual bonus.

15 Q. And so was it generally your bonus was about
16 20 percent of your overall compensation package?

17 A. I had the availability of going up to 20
18 percent if all of the metrics that I was held
19 accountable during that year were met and the
20 company made plan and there was a component, I
21 believe, originally at the Watson level and how well
22 Watson did as an organization as well.

23 Q. You were with the company for, what, about
24 seven or eight years?

25 A. I was hired on August the 4th of 2008, and

1 my severance package date on there has that my
2 ending date was June the 29th of 2015.

3 Q. Okay. So during those years, how many of
4 the years did you get to the 20 percent? And if you
5 don't get to the 20 percent bonus, what were the
6 varying -- what were the lowest bonus that you got
7 in any given year?

8 MS. KOSKI: Object to form; compound.

9 BY MS. RELKIN:

10 Q. Good point. What was the lowest bonus you
11 had in any given year, if you can recall?

12 A. I can't recall. It fluctuated every year.

13 Q. So --

14 A. I remember a 9 percent. I remember a 15
15 percent. I remember nothing or very little. I
16 don't -- I don't have those numbers memorized.

17 Q. You got 20 percent at least one year?

18 A. I believe so. I believe so.

19 Q. Were there stock options or stocks provided
20 as well?

21 A. Yes, there were some stock options.

22 Q. And the stock was with Watson?

23 A. It was originally with Watson, and then
24 everything transitioned over to Actavis, and then
25 from Actavis it transitioned over to Allergan.

1 Q. And do you have stock in Watson, Actavis,
2 and Allergan?

3 A. No longer.

4 Q. Did you -- when did you sell that stock?

5 MS. KOSKI: Object to form.

6 A. I exercised those options over a period of
7 years -- and I did hold onto a significant amount of
8 them and got rid of those in 2016.

9 Q. Now Anda is owned by Teva; is that right?

10 A. That is correct.

11 Q. Do you have any stock in Teva?

12 A. No.

13 Q. And you talked about base pay and then the
14 bonus, which was the varying percentages?

15 A. Varying, uh-huh.

16 Q. On top of that, there would be stock
17 options; is that right?

18 A. The -- there was a -- what was called a
19 long-term incentive was there were stock options,
20 part of the long-term incentive. So some years
21 there would be some stock options offered to me and
22 other years there were not.

23 I was offered an initial group of shares as
24 well if I retained and stayed on with the company
25 for a period of time -- I think it was two years or

1 four years -- payable incrementally as I had
2 longevity with the company.

3 Q. And when the company -- when Watson sold to
4 Actavis, you kept your Watson stock options and then
5 you also then got Actavis? Is that how it worked?

6 MS. KOSKI: Object to form.

7 A. It had -- they had to all be converted over.
8 They all were converted over, because at the time of
9 the conversion, none of my stock options were
10 payable.

11 Q. Got it.

12 A. They weren't payable until future dates.
13 There was nothing payable to me immediately.

14 Q. What was the approximate amount of your --
15 of the sale of all your options?

16 MS. KOSKI: Object to form.

17 A. Over the entire course of the time that I
18 was with the company?

19 Q. Yes. Until when you sold in 2016, yeah.

20 A. Okay. May I ask another -- another
21 question?

22 Q. Sure.

23 A. A clarifying question?

24 There was a price that the stock was given
25 to me at, and then there was the price that it was

1 actually sold at if there was an appreciation time
2 frame. Okay. Which of those numbers would you
3 like?

4 Q. Why don't you give both, the best that you
5 can recall.

6 A. I want to say that I had a total combined of
7 about 3,000, maybe 3,200, shares over a period of
8 time, and those did appreciate. Because they were
9 issued at all different amounts, from \$35 up to over
10 \$190, depending on what the share price was going
11 for, for which company we were under at that time.

12 And then, obviously, Allergan, which is when
13 it was finally sold -- when I actually sold the
14 majority -- I think I may have sold a few shares
15 right after year number four that I was with the
16 company, because I think that was the first time
17 that I was eligible to actually exercise the option.

18 Q. Right.

19 A. And I want to say then I maybe took what was
20 the equivalent of 100 shares, maybe 200 shares. I
21 don't recall. I'd have to look.

22 Q. And then when you sold the bulk of them in
23 2016, how much did you receive?

24 A. I netted about -- let me think here. It was
25 about \$600,000, I believe.

1 Q. In addition to the stock options, the base
2 pay, and the annual bonus, you said there was a
3 401(k).

4 Did they match that as well?

5 A. Yes, they did.

6 Q. And up to what percent?

7 A. They matched like 2 percent. I believe it
8 was 2 or 3 percent, up to 6 percent, from what I can
9 recall. And I believe it did change. I believe it
10 started out as 2 -- 2 percent, and then it -- I
11 believe it went to 3.

12 Q. You said it went up to 3, not --

13 A. I believe so.

14 Q. -- not 6 percent?

15 MS. KOSKI: Object to form.

16 BY MS. RELKIN:

17 Q. If you put up to 3, they matched 3?

18 A. Correct.

19 Q. Got it.

20 A. Sorry I didn't explain that correctly.

21 Q. What was -- with regard to your bonus, what
22 was the highest bonus you received the year you hit
23 20 -- or the year or years -- or what amount of
24 money was that?

25 MS. KOSKI: Object to form.

1 A. I don't recall the amount.

2 Q. Approximately.

3 A. I don't recall. I know there -- I remember
4 somewhere -- it was around \$15,000. I really don't
5 recall the numbers.

6 Q. And your base pay was?

7 MS. KOSKI: Object to form.

8 A. I was hired in at \$110,000. My base pay
9 when I left was 185.

10 Q. And what was the severance that they
11 provided?

12 A. Thirty-nine months.

13 Q. So you got your base pay for 39 months?

14 A. I apologize. I'm so sorry.

15 Q. That's a good deal.

16 A. Please strike that. It was for 9 months.
17 It was 39 weeks, not 39 months.

18 Q. I would say that's very generous.

19 So you got nine months --

20 A. Correct.

21 Q. I'm sorry to have been intrusive, but this
22 is what we do.

23 Would you agree with the statement that
24 there is an inherent tension between Anda's desire
25 to sell and make profit and the responsibility to

1 ensure they were not selling to customers who were
2 allowing controlled substances to get diverted?

3 MS. KOSKI: Object to form.

4 Are you asking her opinion about that
5 statement?

6 MS. RELKIN: Yes.

7 MS. KOSKI: Not a fact question but her
8 opinion?

9 BY MS. RELKIN:

10 Q. In your experience as sales manager for
11 inside sales at Anda, did you perceive that there
12 was inherent tension between the goal of selling and
13 making profit for the company and the imperative to
14 avoid sales to inappropriate customers who might be
15 placing suspicious orders?

16 MS. KOSKI: Object to form.

17 A. Was there tension? I don't consider it a
18 tension. Were we all aware of our obligation? Yes.
19 To do things ethically and to be an ethical member
20 of the community, absolutely.

21 Did we -- did I ever feel that the sale of
22 the CIIs inhibited my ability to reach my goals?
23 No, because it was a small portion of our business.

24 Our generic sales were what really drove our
25 business, and although CIIs were a part of that,

1 they didn't -- my goals were not given to me as
2 you've got to hit this much in a CII goal on a
3 monthly basis, on a yearly basis. I was given a
4 brand goal, I was given a generic goal. Out of all
5 the SKUs that we offered, that were -- those were my
6 directives.

7 Q. Well, were there circumstances where one of
8 your sales reps had a good customer who was a big
9 purchaser of the other non-CIIs, but they also were
10 seeking more and more CII products that was of
11 concern?

12 MS. KOSKI: Object to form.

13 A. I recall that we had a number of sales reps
14 that were relaying what the customer wanted us to do
15 in terms of requesting -- we talked about
16 requesting, you know, control increases, and we had
17 processes for those and those were sent to the
18 compliance department to review.

19 It was the compliance department's decision
20 as to whether to approve those or not. It was
21 communicated back as to whether those would be
22 approved or not, and that would then be communicated
23 back to the customer.

24 Q. In those circumstances, you had sales reps
25 who were concerned that if they didn't provide their

1 customers with the increase or the amount of opioids
2 that they were seeking, that they would lose the
3 customer business for all purposes; isn't that true?

4 A. That is true, yes. They were very
5 concerned. The sales reps were paid a -- depending
6 on whether they were a new hire or a more seasoned
7 sales rep, were paid 9 -- the more seasoned sales
8 reps were paid \$9 an hour, and theirs was entirely
9 almost commission based. So an impact of a customer
10 leaving and taking not only the CII but all of their
11 generic business absolutely would have been of
12 concern to a sales rep.

13 However, that being said, they understood
14 that if something were to happen with that customer
15 and that customer ultimately resulted in something
16 further down the line happening to Anda, none of
17 them wanted to be in that position. So they were
18 kind of torn. They were torn to trying to be the
19 customer advocate but also making sure they did the
20 right thing for the company.

21 Q. And some of them tried to push the envelope?

22 A. Yes. Salespeople try to do that, but those
23 are the ones that we had to constantly bring back
24 and remind them of what their job and
25 responsibilities were.

1 Q. Isn't it fair to state that there are a
2 number of e-mails where the sales reps would
3 advocate to increase the limit because the customer
4 was an important customer to the company?

5 MS. KOSKI: Object to form.

6 A. There were customers that were not only
7 important to the customer -- to the company, they
8 were important to them and the sales rep and their
9 income.

10 Q. And they advocated, please increase the
11 limit?

12 A. They would.

13 Q. Or please give us an extension on the
14 paperwork?

15 A. They did that initially when these processes
16 of how to go about requesting the increase began,
17 but after a period of time and more education and
18 more knowledge about the subject, more understanding
19 of what was going on in the market, that became less
20 and less an issue.

21 Q. When you say more understanding of what was
22 going on in the market, what do you mean?

23 A. Meaning the abuse that was happening.

24 And we educated them at every opportunity
25 that we could of scenarios where a pharmacy had been

1 shut down by the DEA, what that reason was, if we
2 knew it. We used those as training opportunities so
3 that we really helped them to get a better
4 perspective.

5 They were very focused on them themselves,
6 and we needed to bring them up and bring that
7 understanding back to the role of the company, the
8 role they played within the company.

9 Q. Chronologically, when you joined the
10 company, you're aware at that point there was a
11 problem with opioid abuse; is that fair to state?

12 A. To be honest, no. In 2008, I don't recall
13 that being something that I was dealing with in the
14 role that I had.

15 I was being charged with putting programs
16 together for the sales force under Kim Bloom's
17 direction. I was putting recognition programs
18 together. I was working with training on the
19 curriculum. I was working with a lot of other
20 initiatives. So there was no emphasis in my world
21 at the time on anything on CIIs.

22 Q. When did you first become aware of opioid
23 abuse problems?

24 MS. KOSKI: Object to form.

25 Are you asking her personally?

1 MS. RELKIN: Yes.

2 A. I would say it would probably have started
3 somewhere in the late 2009, 2010. And the reason I
4 say that is because the compliance team at that time
5 started asking for more participation from our sales
6 floor to help them in being those eyes and ears,
7 helping them to get updated customer questionnaires.

8 They had always used a customer
9 questionnaire, but we wanted to get current ones and
10 make sure we were keeping them on a current basis.
11 And so the sales floor and sales reps were asked,
12 because of their role with the customer, to try to
13 help us in that initiative.

14 Q. The initial training regarding opioids, for
15 example, what's in this slide deck of Exhibit 2,
16 fair to state that that did not begin until 2010?

17 A. There was other training that went on. I
18 remember training when I first went into new hire
19 training in 2008 that had to do with controlled
20 substances. I think this was a refreshed module of
21 one that may have been already out there and updated
22 with the decisions that management team had made,
23 but this was not the first training that had ever
24 occurred on it, no.

25 Q. So it's your testimony that training began

1 when you were a new hire in 2008?

2 A. Correct.

3 Q. Was it less detailed?

4 A. I think it was a little bit less detailed.

5 It was more about what CSOS was, what -- why would a
6 customer use CSOS, what was the process for ordering
7 a CII.

8 We were not forbidden from ordering and
9 fulfilling an order for a CII. We did it every day
10 for our clients. There were control limits in place
11 from the -- way before I started, and I'm sure they
12 probably are even more so now. But those limits
13 were always in place.

14 So there could never be a time when the
15 sales rep just went willy-nilly and started, you
16 know, shooting tons of CII products out there.
17 There was always a limit to the amount of ordering
18 that that customer could do for any CII product.

19 Q. You talked about the salespeople had their
20 regular wage was \$9 an hour, and then they got
21 commission. What was the typical breakout of how
22 much of their compensation was commission?

23 MS. KOSKI: Object to form.

24 A. I would say on the average, for a seasoned
25 representative, it was probably 90/10. They had a

1 very, very, very small base. New hires were paid
2 \$15 an hour for the first two years unless their
3 book of business grew substantially to the point we
4 had -- I had a formula that I was able to utilize to
5 determine when did it make sense to move them from
6 what we called the rookie plan to become a
7 full-fledged sales rep, actually graduate them, so
8 to speak, or promote them to a full sales rep
9 status, at which point they would earn the \$9 and
10 their commission would be enough to sustain that
11 difference.

12 Q. I see.

13 So the new hires started at \$15?

14 A. Correct.

15 A. Because they had very little -- they had no
16 accounts. They started with zero. Zero accounts.
17 And then as their book of business grew -- some
18 sales floors -- just a little bit of call center
19 education.

20 Some call centers, the sales floor is
21 territorial about their accounts, meaning if I am a
22 sales rep and I have 100 accounts, I'm always going
23 to be worried that somebody is going to try to steal
24 my account. That was not the way at Anda. Anda
25 never operated under that type of feeling, as long

1 as I was there.

2 When you got an account and you opened that
3 account and you cultivated that account, that
4 account was yours. And the only time that we would
5 move that account was if there was some kind of
6 major customer issue that -- interaction issue that
7 happened between the customer and the sales rep
8 where the customer physically asked for a change in
9 their sales rep, or if the sales rep left the
10 company.

11 So to that end, they were encouraged to
12 continue to grow their book of business.

13 Q. Did the sales force also get a bonus based
14 on performance?

15 A. They did. Theirs was a quarterly bonus
16 based on a variety of call center metrics: talk
17 time, number of accounts that they had sold to, a
18 variety of --

19 Q. Did any of the metrics that were used to
20 formulate their quarterly bonus give credit for
21 sales reps pointing out potential suspicious orders
22 for -- concerning customers?

23 MS. KOSKI: Object --

24 Q. -- with regard to opioids?

25 MS. KOSKI: Object to form.

1 A. No, ma'am.

2 Q. Was there any incentive provided to any of
3 the employees at Anda to detect suspicious orders?

4 MS. KOSKI: Object to form.

5 A. An incentive? No. We didn't bring an
6 incentive to bring something to our attention that
7 we needed to have brought to our attention.

8 Q. You indicated there was no competition
9 within the sales force, people respected each
10 other's customers.

11 Was there some point in time where you were
12 concerned about sales reps working after hours,
13 after the 9:00 shutdown?

14 A. Yes. Yes.

15 Q. What was that about?

16 A. We had -- we had about five or six sales
17 reps, and these were all senior sales reps, and our
18 senior sales reps were on salary versus a hourly
19 rate. And we were just concerned that they were
20 staying there unsupervised.

21 We normally had a sales manager on every
22 night until 9:00 o'clock, but some of our senior
23 sales account managers liked to stay until 9:15,
24 9:30.

25 Technically our phones closed at

1 9:00 o'clock. So we wanted them really off the
2 phone and leaving for the night and --

3 Q. Well, they weren't hourly. They were
4 salaried, and they were senior.

5 So what was the concern?

6 A. The concern was that they were in a building
7 alone and that there was no managerial supervision
8 there, and we were -- all we did, we just asked them
9 if they could please try to leave when the sales
10 manager left.

11 It wasn't a question of --

12 MS. KOSKI: Just wait for another question.

13 THE WITNESS: Okay.

14 MS. KOSKI: Sorry to interrupt you.

15 THE WITNESS: That's okay.

16 MS. KOSKI: Question, answer; question,
17 answer.

18 MS. RELKIN: We'll mark this as Exhibit 3.

19 (Anda-Williams Exhibit 3 was marked for
20 identification.)

21 BY MS. RELKIN:

22 Q. Before I turn to this exhibit, were those
23 after hours sales calls recorded as part of the QA
24 system?

25 A. All their calls were recorded regardless of

1 the time unless we had specifically taken that
2 particular customer off of call recording.

3 Q. Was there any concern that the sales folks
4 were spying on what was going on in compliance?

5 MS. KOSKI: Object to form.

6 A. In compliance? I don't ever recall that.
7 Compliance was at the very opposite end of the
8 building from where sales was.

9 Q. Got it. Okay.

10 So what we've marked as Exhibit 3 is
11 produced from your files, and it's
12 Anda_Opioids_MDL107802.

13 Let me know when you have a chance to look
14 at this. We can start from the bottom.

15 A. I am. This was a CIII.

16 Q. So this e-mail is from Seth Rudnick to you
17 regarding touch X item with a number there.

18 And do you see that?

19 A. Yes.

20 Q. Mr. Rudnick says: Pat, I don't know if this
21 needs to be addressed, but I noticed there is no
22 limit for this item. It's a control item, and after
23 mentioning to several customers, I found out is
24 commonly abused.

25 We have strict limits and policies in place

1 on all controls now, but a customer could buy every
2 bottle we have of this if they wanted to. I thought
3 I should let you know about it.

4 And he's a senior account sales manager?

5 A. Yes, he was.

6 Q. And then --

7 A. This was a new CIII, obviously, that came
8 in.

9 MS. KOSKI: Just wait for a question.

10 BY MS. RELKIN:

11 Q. Is it correct that you then responded
12 to Mike -- you forwarded this to Patrick Cochrane
13 and Michael Cochrane?

14 A. Correct.

15 Q. What did you say to them?

16 A. I said that I didn't see it was assigned to
17 a particular control group. Would this be in the
18 default "other" category.

19 Q. And what did Patrick Cochrane say?

20 A. Patrick Cochrane said that the item was in
21 the hydrocodone family, but it was considered a
22 CIII, so I don't know exactly what the makeup of the
23 hydrocodone was. What is leading him to believe
24 that a customer could order more than their limit
25 allows?

1 I said: Thanks for the information. As to
2 your question, I'll address that with him shortly.

3 I don't -- I don't know if he went in and
4 tried to order something and saw that he could
5 order -- because on CIIIs, sales reps were able to
6 key those orders in. They could not key or punch in
7 any CII orders, but a CIII or a CIV, that could have
8 been done.

9 So I think he was questioning was the setup
10 of the item done properly in the system when it was
11 launched.

12 Q. Patrick Cochrane said: What is leading him
13 to believe that a customer could order more than the
14 limit allows?

15 And then you said to him: Thanks for your
16 info. As to your question, I've addressed that with
17 him separately.

18 So do you remember a discussion with
19 Mr. Rudnick?

20 A. I'm sure I did. I had a good relationship
21 with Seth, and Seth was always the eyes and ears for
22 the company and was always looking out for the
23 right -- doing the right thing.

24 Q. Do you remember what the outcome was?

25 A. I do not recall what the outcome of this

1 was. I do not.

2 Q. But when you said the limits are always in
3 place, here's an instance where a product in the
4 hydrocodone family had no limits; isn't that
5 correct?

6 A. According to this e-mail, correct.

7 Q. One more question about your employment
8 situation.

9 When you got a severance package, was there
10 a termination agreement?

11 A. Yes.

12 Q. Okay. And was there a nondisparagement
13 clause in that?

14 MS. KOSKI: Object to form.

15 A. Nondisparagement? Yes.

16 Q. And what that means is that you weren't
17 supposed to say anything negative about the company;
18 is that right?

19 A. Correct. Uh-huh.

20 Q. And were there any enforcement consequences
21 if you did say anything negative about the company?

22 A. I would have to go back and re-read that
23 document. I don't recall the consequences.

24 Q. I'm going to be asking some questions about
25 promotional efforts and sales of CIIs.

1 MS. RELKIN: Could I have an exhibit
2 sticker? We'll mark this as Exhibit 4.

3 (Anda-Williams Exhibit 4 was marked for
4 identification.)

5 MS. RELKIN: Here's one more if somebody
6 needs it.

7 BY MS. RELKIN:

8 Q. What I've marked as Exhibit 4 is stamped
9 Number 0610875 from Anda files, your custodial file.

10 And do you see that this is an e-mail from
11 Marc Falkin on December 12th, 2008, and you were one
12 of the recipients; is that fair to state?

13 A. Uh-huh. Yes.

14 Q. And the topic was "CII Promo with Teva
15 Fentanyl Patches"; is that right?

16 A. Yes.

17 Q. And promo means promotion; is that right?

18 A. Correct.

19 Q. And fentanyl patches, fentanyl, is certainly
20 a controlled substance, a CII opioid product,
21 correct?

22 A. I do not recall if fentanyl is a CII. I
23 know there -- I don't believe it is. I would have
24 to double-check. The oxys definitely were. The
25 oxys were the CII here.

1 Q. Did you ever get any training from anyone at
2 Anda that fentanyl was one of the deadliest of the
3 opioid products?

4 MS. KOSKI: Object to form.

5 A. I do not recall, no.

6 Q. And if you're not sure it's a CII, what was
7 your impression of what it was?

8 A. I thought it was a CIII, or possibly a CIV.
9 I would have to double-check.

10 Q. Did you understand that fentanyl was a
11 synthetic opioid?

12 A. At the time that this was written back in
13 2008, I was only on board about five months, not
14 even that, and I was brand new to the world of
15 pharmaceuticals, so -- right.

16 Q. Understood.

17 But then you were there for many years where
18 you interacted with pharmaceuticals?

19 A. Correct.

20 Q. And your testimony now is that you were not
21 under the impression at that time period that
22 fentanyl was a CII product; is that right?

23 MS. KOSKI: Objection; mischaracterizes her
24 testimony.

25 A. I would have to go back and refresh my

1 memory on that.

2 Q. Well, in any event, you see that the -- it
3 says "CII Promo with Teva Fentanyl Patches,"
4 correct?

5 A. Correct.

6 Q. And Teva is a large generic pharmaceutical
7 company, correct?

8 A. Uh-huh. Yes.

9 Q. They ultimately have acquired Anda; is that
10 right? They are the current owner of Anda?

11 A. They are now.

12 Q. And it -- Marc Falkin said to you and
13 others: George and I have established the following
14 to help move the Teva product.

15 What does that mean, help move a product?

16 A. To help sell the product.

17 Q. And what does he describe there?

18 A. For every four units of a Teva patch,
19 customers could get 5 percent one unit of the oxy 40
20 or 80 or two units of the Dava oxy 10 or 20.

21 Q. And then it goes on to provide additional
22 promotional discounts for the Teva patches; is that
23 right?

24 A. Correct, according to what's read here.

25 Q. It says: Purchasing at least four Teva

1 patch in any combination then qualifies customers to
2 purchase other CIIs at 5 percent off, including the
3 Teva patches, excluding branded CIIs.

4 Is that right?

5 A. Yes.

6 Q. And what does this mean, 60 days dating on
7 CII orders the rest of the month?

8 A. That meant that most customers were given 30
9 days to pay their bill, and they were offering
10 extended dating to give customers a little bit
11 longer time to pay.

12 Q. So this was clearly a promotional effort to
13 encourage customers to purchase Teva fentanyl
14 patches and the Dava brand oxy 40 or 80; is that
15 right?

16 MS. KOSKI: Object to form.

17 A. That is correct.

18 Q. And did you know that the Dava oxy 40 or 80
19 was the generic for the brand name for oxy?

20 MS. KOSKI: Object to form.

21 A. Was I aware -- can you repeat that?

22 Q. Were -- withdrawn.

23 Does this document help refresh your
24 recollection that, in fact, there were promotional
25 efforts made to sell --

1 A. Yes.

2 Q. -- CIIs?

3 MS. KOSKI: Let her finish.

4 (Anda-Williams Exhibit 5 was marked for
5 identification.)

6 MS. RELKIN: I'm sorry. I didn't give the
7 witness -- can you pass --

8 BY MS. RELKIN:

9 Q. I've just marked as Exhibit 5 a document
10 that was produced from your files, Number 08 --
11 just -- I'm just going to read the numbers,
12 scratching out the zeros: 82451.

13 THE VIDEOGRAPHER: It's okay. You hit the
14 backlight.

15 MS. RELKIN: How do we fix that?

16 (Discussion off the record.)

17 MS. KOSKI: For the record, it's
18 double-sided.

19 MS. RELKIN: Yes, it's double-sided.

20 A. Ooh. Okay.

21 Q. This is an e-mail chain starting on
22 May 21st, 2012, and then it -- the final e-mail is
23 June 20th of 2012.

24 And recognizing that you were not -- you
25 were not on the original e-mail chains, but I think

1 you got looped in.

2 Do you see where you got looped in here?

3 MS. KOSKI: Take your time if you need to
4 read the --

5 MS. RELKIN: Yeah.

6 You know what, I'm going to come back to
7 this exhibit, okay? So we'll just move on to
8 another exhibit, and we'll come back to this one.
9 This one has an accompanying spreadsheet, it's
10 kind of complicated.

11 Okay?

12 MS. KOSKI: Okie-dokie. You can can just
13 set it aside. She's saying she's not going to
14 ask you the questions.

15 THE WITNESS: Right.

16 MS. RELKIN: This will be Exhibit 6.

17 (Anda-Williams Exhibit 6 was marked for
18 identification.)

19 BY MS. RELKIN:

20 Q. This has been marked as Exhibit 6. It was
21 stamped from your files, Number 712121. It's a
22 short e-mail.

23 This is an e-mail from Ken Fenster on April
24 20th, 2010, to you and others; is that right?

25 A. Yes.

1 Q. Who is Ken Fenster?

2 A. He was the director of marketing.

3 Q. And the subject matter is "May Marketing
4 Driver," and I think you used the term driver before
5 again?

6 A. Yes.

7 Q. Can you explain what that is again?

8 A. The sales reps had a monthly scorecard, kind
9 of like a report card, on their performance, and the
10 sales reps would earn throughout the month something
11 called PMs. That stood for promotional money.

12 There were items that maybe were overstocked
13 on. They could have been items that we just needed
14 to -- we had excess inventory that we were trying to
15 move.

16 So the company would put 25 cents on it or
17 50 cents on it or a dollar to move those products.
18 These are not specific to CIIs. Okay? These are
19 all kinds of generics. In order for the -- those
20 PMs would accumulate through the month, sometimes
21 \$100, \$200, \$300, sometimes more depending on how
22 much they sold.

23 The marketing driver was part of their
24 scorecard. So they needed to hit at least a three
25 on their scorecard and hit their marketing driver

1 for them to earn that PM money.

2 Q. Got it. Okay.

3 A. And they were typically deemed to be
4 initiatives to help drive incremental business.

5 Q. Okay. So this was -- the attachment is
6 called "May Marketing Driver 04, Data Review, CII
7 sales, 90 plus days."

8 And what does this describe here?

9 A. It describes what the marketing driver was
10 for that month. It was focusing in on trying to
11 have customers contacted that had not purchased a
12 CII from us but -- that were eligible but had not,
13 to contact them and see if we could be their
14 supplier and if there was a need.

15 Q. So he advised that in order to achieve your
16 May marketing driver, you must get X number of
17 customers to order a CII by CSOS or paper that have
18 not ordered in the past 90 days or more?

19 A. Uh-huh.

20 Q. And this was going out to all the sales
21 reps; is that right?

22 A. Correct. And each sales rep had a different
23 category. Like they were -- it mentions if they
24 were less than two years, they needed two accounts.
25 If they were -- excuse me -- a more seasoned

1 representative, five, and then all others were
2 eight.

3 Q. Which means that the "all others," for
4 example, needed to get eight new customers -- eight
5 customers who were existing customers who had not
6 previously bought opioids to start buying CII
7 products from Anda, correct?

8 MS. KOSKI: Object to form.

9 A. It was an initiative to see whether we
10 could -- yes, whether we could sell more CIIs to
11 those customers that were eligible but were
12 certainly going somewhere else at that time to
13 purchase those generics sales.

14 Q. And going further down, he says: Most reps
15 have 50-plus accounts that have not ordered a CII in
16 90-plus days. A handful of reps may have a few who
17 do not solicit accounts in their name but should be
18 plenty left over as opportunities for all reps.

19 Is that right?

20 A. Uh-huh.

21 Q. And so it was deemed an opportunity to take
22 customers who were buying the nonopioid products to
23 now start selling them opioid products; true?

24 MS. KOSKI: Object to form.

25 A. This doesn't stipulate whether they were

1 purchasing other control products. It's just the
2 focus on the CIIs.

3 Q. Okay.

4 A. So these customers could have been
5 purchasing a CIII or a CIV, or even a CV, from us,
6 but they were going elsewhere -- more than likely to
7 their primary -- for their CIIs. And we were just
8 trying to skim off a little bit of that -- a little
9 bit of that business.

10 Q. So these were customers who had not
11 purchased a -- ordered a CII in 90-plus days, and
12 you were trying to get some of their business?

13 A. Correct.

14 Again, we were not prevented from selling
15 CIIs. We had our controls in the background and the
16 limits in place for every customer and every family
17 that that customer may want to purchase. So it was
18 not off the table to try to promote additional items
19 to them.

20 Q. But earlier when you said CIIs really wasn't
21 important to the company, here, there is an
22 effort -- this shows -- does this refresh your
23 recollection -- strike that.

24 The distinction with your earlier testimony
25 that CIIs were not important, the focus of the

1 company was selling their other generic
2 pharmaceutical products, does this help refresh your
3 recollection that there were indeed promotional
4 efforts to try to expand the market to sell opioids
5 to existing customers?

6 MS. KOSKI: Object to form.

7 Mischaracterizes her testimony.

8 You can answer.

9 A. There were opportunities, yes, such as this
10 from time to time. Was this an every month event,
11 month in and month out? No.

12 Q. That wasn't my question, whether there was a
13 month in, month out.

14 My question was: Does this help refresh
15 your recollection that there were indeed promotional
16 efforts to try to expand the market to sell opioids
17 to existing customers?

18 MS. KOSKI: Asked and answered. Go ahead.

19 A. Yes.

20 MS. KOSKI: Ellen, I think I set up lunch
21 today for 12:30. It's only 11:30 now, but for
22 your planning purposes.

23 MS. RELKIN: Okay. Thank you.

24 (Anda-Williams Exhibit 7 was marked for
25 identification.)

1 BY MS. RELKIN:

2 Q. This will be Exhibit 7.

3 MS. KOSKI: This is another double-sided
4 exhibit.

5 BY MS. RELKIN:

6 Q. So, Ms. Williams, what we've marked as
7 Exhibit 7 is another document produced from your
8 files stamped 629163, and it -- as counsel
9 indicated, it is double-sided. It's an e-mail chain
10 start with a forward of an e-mail.

11 The e-mail was from Cathy Novaro to Vickie
12 Shalley. That's your friend Vickie who you still
13 stay in touch with; right?

14 A. Yes.

15 Q. And it was copied to Ken Fenster, and the
16 subject was "CII Actavis Credits," and it indicated:
17 Attached is Barry Koran's CII Actavis promotion
18 credit accounts. Please let customer service know
19 if you want them reversed.

20 And that's just the stepping stone for my
21 questions to you.

22 That was then forwarded --

23 MS. KOSKI: I don't know if she's listening.
24 I think she's reading.

25 A. Yeah, this is totally unfamiliar to me. I

1 don't understand this.

2 MS. KOSKI: Now, if you've read it, wait for
3 a question.

4 BY MS. RELKIN:

5 Q. Just for clarification, in terms of the
6 chain of this e-mail, you're on the top that it was
7 forwarded to you from Vickie Shalley on
8 January 19th, 2010.

9 Do you see that?

10 A. Yes.

11 Q. Okay. Again, the same subject matter about
12 Barry Koran, Actavis CII Credits.

13 I'm going to focus here on the e-mail from
14 Vickie Shalley to Barry Koran.

15 And do you want to read into the record what
16 he said -- what she said to him?

17 A. She said: Barry, please let me know what
18 this is all about. Reply for me by e-mail in case I
19 need to escalate it.

20 Q. Okay. If you can turn to the first page of
21 the document.

22 A. Okay.

23 Q. The first page.

24 A. Uh-huh.

25 MS. KOSKI: If you look on the screen.

1 BY MS. RELKIN:

2 Q. Yeah, I'll just direct your attention to the
3 area I wanted to discuss.

4 A. Oh, okay.

5 Q. If you look at the screen, Vickie Shalley to
6 Barry Koran, this is 1:52 p.m.?

7 A. I see.

8 Q. And she said: I contacted Cathy Novaro on
9 this. Basically I had several customers with
10 credits showing from Actavis promo. I did not push
11 the promo, but I always push CIIs. I was pushing
12 the OxyContin with several customers, and I noticed,
13 because of the sale of Oxy, their other item orders
14 were being credited, large numbers -- or large
15 dollar sign, dollar sign.

16 MS. RELKIN: I'm tapping it. Sorry.

17 BY MS. RELKIN:

18 Q. Do you recall seeing this e-mail?

19 A. Uh-uh.

20 MS. KOSKI: Answer verbally.

21 A. No, I don't recall.

22 Q. You see this e-mail was ultimately forwarded
23 to you?

24 A. I do see that, but I don't recall this.

25 Q. You don't recall any conversation of

1 concern?

2 A. I'm sorry, I don't.

3 Q. But do you see that Vickie said she always
4 pushes CIIs?

5 MS. KOSKI: Object to form.

6 A. No. Barry said this to Vickie. It's to
7 Vickie from Barry.

8 Q. Oh, you are correct. I stand corrected. So
9 Barry Koran said to Vickie: I always push CIIs.

10 Correct? Do you recall Barry Koran?

11 A. Yes. He was one of our senior account
12 managers.

13 Q. Did he get disciplined for any of his
14 conduct in marketing -- strike that.

15 Did he ever get disciplined for any of his
16 conduct in selling CIIs?

17 MS. KOSKI: Object to form.

18 A. Not that I can recall, no.

19 Q. Do you find anything problematic with his
20 outlook that he always pushes CIIs?

21 MS. KOSKI: Object to form.

22 Are you asking as she sits here right now?

23 She said she didn't remember the e-mail.

24 MS. RELKIN: Fair enough.

25 BY MS. RELKIN:

1 Q. So as -- as -- did he report to you?

2 A. He reported to Vickie.

3 Q. Okay. And you never had a conversation with
4 Vickie about his comment about pushing -- always
5 pushing CIIs?

6 A. I don't recall.

7 Q. Do you recall ever having an issue with
8 Barry Koran about his approach to CII sales?

9 A. No, I do not recall.

10 Q. Any other problem with Barry Koran?

11 A. I had other issues with Barry Koran. I
12 loved him, but we had a love/hate relationship. I
13 wanted him on the phone more than what he was, and
14 he tended to want to do his own thing.

15 But in terms of trying to sell, he always
16 was selling to people who had the ability and had
17 the limit in place to be able to promote the item.
18 Whether the customer was buying from us or not, that
19 limit was in place. It was assigned by compliance,
20 and that was our role. Our role was to sell, and
21 CIIs were not off the table.

22 They, again -- he had -- certain customers
23 had -- certain sales reps had certain customers that
24 were buying their CIIs from a lot of other sources,
25 and our job was to try to get incremental sales.

1 And if we could do it through generic sales, brand
2 sales, CII sales, that was a sales rep's job.

3 Q. One other comment here I didn't highlight
4 was -- this was dealing with getting credits, and he
5 said: The customers are being unnecessarily
6 credited due to their large usage of the Oxy.

7 Do you see that?

8 A. Yeah, I'm --

9 Q. Large -- large usage of the Oxy is one of
10 the factors that goes into our red flag of a concern
11 about suspicious ordering; is that fair to state?

12 MS. KOSKI: Object to form.

13 A. I guess it would have to be in the context
14 of what that customer was typically doing. They
15 could have been legitimately approved to order the
16 Oxy, which they would have had to have been in order
17 to even get it from us.

18 But I don't know what this credit was all
19 about, and I don't recall what this promotion was
20 about. This is 2010. It's just not ringing a bell
21 at all.

22 Q. The question is whether a customer that has
23 a large usage of Oxy, whether that is a concern, a
24 flag to consider in whether the usage is
25 appropriate, that it's a large usage.

1 A. Not necessarily. A large usage of Oxy by
2 our standards may have been a drop in the bucket
3 compared to what the customer was actually
4 purchasing elsewhere. So the terminology itself
5 was -- is not -- looks alarming now, looking back on
6 it; at the time, I just don't recall. I don't
7 recall this -- the e-mail. I don't recall what
8 these credits were about.

9 Q. So when you said a large usage of Oxy by --
10 may have been a drop in the bucket compared to what
11 the customer was actually purchasing elsewhere, are
12 you saying they could have been purchasing even more
13 Oxy elsewhere?

14 A. What I'm saying is when they are saying
15 large usage of Oxy, I don't know if he's talking
16 about the large usage from just us -- what they were
17 getting from us or if he knew something about the
18 customer, meaning that they were buying a large
19 amount of Oxy in total from all of their suppliers.

20 Q. Is that something that the sales reps were
21 supposed to ascertain, whether their customers were
22 buying large amounts of Oxy elsewhere?

23 A. Sometimes -- I apologize.

24 Sometimes the customers would volunteer that
25 information. Oh, I'm getting it from this or I have

1 a limit of this amount at this particular
2 distributor, why can't you match that.

3 So sometimes that did come up and hear of
4 information that would indicate when the customer's
5 patterns were.

6 Q. But the sales reps were not instructed to
7 try to elicit that information from the customer?
8 So for example, if the customer called and said I
9 want 1,000 oxys, the sales reps didn't say, how much
10 are you getting from your primary supplier?

11 A. Not typically.

12 Q. So you wouldn't necessarily know whether
13 they are getting a large amount from the other?

14 A. Correct. Correct. Barry -- Barry had had
15 most of his customers over 20 years, the same
16 customers over 20 years, so he knew these folks,
17 many of them, very, very, very well. It -- what
18 he's speaking to here, I can't answer.

19 Q. Even though your job and your department's
20 job was to sell product, with regard to the CII
21 sales, isn't it fair to state your job was also to
22 look for suspicious orders?

23 MS. KOSKI: Object to form; mischaracterizes
24 her testimony.

25 A. To look for suspicious orders? That was

1 primarily a compliance function because they
2 reviewed all the CII orders that went out before
3 they were shipped.

4 Q. Right. But we've talked about, know your
5 customer?

6 A. Correct.

7 Q. And that involved the sales force as well?

8 A. Correct. And if we -- if we saw something
9 or the sales reps were supposed to bring it to our
10 attention if they noticed something. Again, that
11 was an education process. It was happening over
12 time, 2008, 2009, 2010, we started seeing a
13 turnaround in how they were absorbing the
14 information and that became less of a question.

15 Q. What became less of a question?

16 A. What I mean less of a question, I mean less
17 of a reason for -- how could I -- I need to reword
18 that.

19 There were less instances of the sales reps
20 not diving into an issue, meaning if they saw
21 something like this, that they would start bringing
22 it to the attention of their manager.

23 Q. You're saying over time --

24 A. They were getting better and better at it.
25 At first it was, you know, it was a hit, it was a

1 hit to them if somebody was taken off of controls
2 and we continued to educate them about bringing
3 these things to our attention, letting us know if
4 there is something suspicious going on.

5 Q. But here in the context with -- of
6 Exhibit 7, we have a seasoned sales rep, as you
7 said, Barry had been with the company for many
8 years, right?

9 A. Uh-huh.

10 Q. And the reason why this was brought to the
11 attention of Vickie Shalley, and ultimately others,
12 was not for him not to flag, oh, there is a concern
13 about this customer, instead it was for him to flag
14 that there should not be a refund --

15 MS. KOSKI: Objection.

16 Q. -- a credit?

17 MS. KOSKI: Sorry. Objection; lack of
18 foundation.

19 Q. Is that -- he was complaining that those
20 customers, three particular customers, are being
21 unnecessarily credited due to their large usage of
22 the oxy, and he said, I would like to save the
23 company money as well as myself on this. So he did
24 not want to give them that credit for the oxy
25 purchase so that there could be higher commissions

1 on his end and the company's end, correct?

2 MS. KOSKI: Objection; lack of foundation.

3 You can answer if you know.

4 A. That's the way it would appear.

5 Q. Okay. And in terms of -- you talked about
6 the evolving nature over time of there's a greater
7 awareness of the opioid epidemic over the years. Is
8 it fair to state that in 2010 the culture was such
9 that as far as you know, there was no concern or
10 uproar over a seasoned sales rep saying he always
11 pushes oxy?

12 A. Not at that time.

13 Q. Okay. Would you say that in later years
14 there would have been an uproar with that mentality?

15 MS. KOSKI: Object to form.

16 Q. Is that a yes?

17 MS. KOSKI: I just objected to form. You
18 can answer.

19 A. Yes.

20 (Anda-Williams Exhibit 8 was marked for
21 identification.)

22 BY MS. RELKIN:

23 Q. I've just marked as Exhibit 8 a document
24 numbered 630034, which is an e-mail -- well, it's a
25 series of e-mails and I'm going to primarily focus

1 on the e-mail from you, which is in the front of the
2 document, the first page of the document -- take it
3 back, it's not from you. It's to you. Strike that.

4 The bottom part of the first page --

5 A. Correct.

6 Q. -- is an e-mail from you?

7 A. "Guys, any ideas on what the issues are?"

8 Q. Right. From Patricia. Patricia-Anda
9 Williams, it looks like your middle name is Anda.
10 But we know it's not. That is just how it looks.

11 A. There were two Patricia Williams in the
12 organization and was given to me to decipher me from
13 the other person because we were always getting our
14 e-mails crossed.

15 Q. And the other was a Patricia Watson?

16 A. There was another Patricia Williams.

17 Q. In the Watson piece?

18 A. I don't recall where that -- I think it was
19 an outside sales rep somewhere in the Midwest.

20 Q. And so this was from you --

21 THE VIDEOGRAPHER: Hit it again. One more
22 time.

23 Q. -- to Frank Sanchez, and who was Frank
24 Sanchez?

25 A. Frank Sanchez was one of our sales reps.

1 Q. The subject was, "Giant Eagle Stores Updated
2 List Final Actavis Oxycodone CR & Fentanyl Patch for
3 Giant Eagle from Anda."

4 And what did you say?

5 A. I said, "Guys, any ideas on what the issues
6 are? Appears only three stores have placed CII
7 orders since the last report was run. We'd love to
8 get some feedback on what you're hearing."

9 Giant --

10 MS. KOSKI: Wait for a question.

11 Q. And you were expressing concern that there
12 were only three stores who placed opioid orders
13 since the last report was run. Is that fair to
14 state?

15 MS. KOSKI: Object to form.

16 A. I was doing some investigative work for the
17 national account team because Giant Eagle was one of
18 the national account chains that was on our floor
19 and we took direction from national accounts on
20 certain initiatives that they were working with a
21 chain on.

22 Frank, Gary Louis Charles and Kimberly were
23 all members of the sales floor that had Giant Eagle
24 stores assigned to them to call on and when they
25 were given an initiative by the national account

1 manager, who at this time was Jennifer Jaumotte, we
2 were -- there was some kind of promotion that was
3 going on with that Giant Eagle store where an
4 agreement had been reached that they were -- for
5 some period of time were going to order those CIIs
6 from us. And so we were asked to call and get some
7 feedback as to why they hadn't placed their CII
8 orders, because typically Giant Eagle would have a
9 directive coming down from the Giant Eagle corporate
10 to say to all their stores for this particular
11 product on this particular time period, we want you
12 to order those from Anda.

13 Q. And the particular CIIs was Actavis
14 oxycodone CR and fentanyl patch, correct?

15 A. Correct.

16 Q. And was this some kind of arrangement with
17 Actavis to promote their oxycodone?

18 A. It must have been, yes, and they were
19 working at the national account level to get that
20 product -- those two products into those stores.

21 Q. Okay. And then there was a response from
22 Gary Louis -- is it Gary Louis Charles?

23 A. Correct.

24 Q. Okay. There was a response from Gary Louis
25 Charles on December 23rd, 2009, and he said,

1 "Apparently the stores --

2 Again.

3 THE VIDEOGRAPHER: You got it.

4 MS. RELKIN: Technology challenged.

5 Q. He said, "Apparently the stores do not
6 realize it is not optional."

7 Do you see that?

8 A. Yes.

9 Q. He said, "I've had several stores recently
10 say to me that it's not worth their while dispensing
11 the generic for just a limited period of time. They
12 don't want the hassle of billing their patients for
13 generic one time then having to switch them all back
14 to brand pay. They are being rather reluctant. I
15 think we may need the director to re-issue
16 the directive."

17 Is that right?

18 A. Mm-hmm.

19 Q. So -- So basically the customers didn't want
20 to bother with the short term promotion for the
21 generic oxy and fentanyl but because it wasn't
22 optional, they had -- your salespeople had to make
23 sure the customers did indeed promote it, correct?

24 MS. KOSKI: Object to form.

25 A. We were asked --

1 Q. Wait. I strike that back. I used the word
2 customers. Let me rephrase.

3 The gist of this -- is it fair to state --
4 was that it was not optional for your sales reps to
5 choose whether or not to promote this short-term
6 promotion of Actavis oxycodone and fentanyl patch,
7 they were required to?

8 MS. KOSKI: Object to form; mischaracterizes
9 the document.

10 Q. Is that correct?

11 A. They were being asked by the national
12 account team to place those calls because the
13 national account director at Giant Eagle had sent
14 the directive to their stores that they were
15 supposed to take -- that the stores were supposed to
16 utilize Anda for those items.

17 Our role was to follow up with those stores
18 and encourage them to use it because it was coming
19 as a directive from their boss, so to speak.

20 Q. And the national sales is part of Anda?

21 A. National is part of Anda, correct, and the
22 national account team would many times give our
23 sales reps directives on calling initiatives on
24 specific chain events like this.

25 Q. And part of the initiative underlying this

1 was that there was some type of agreement between
2 Anda and Actavis to promote these generic products,
3 correct?

4 A. Apparently, but where my reps got involved
5 would be that there was some agreement between Anda
6 and Giant Eagle to promote these, because the Giant
7 Eagle corporate is behind this, which happened for
8 many launch products. I don't know if this was a
9 launch product or not, but this happened frequently.

10 Q. But in terms of the chain of distribution,
11 so to speak, the generic manufacturer, Actavis, had
12 some type of arrangement with Anda to promote their
13 oxycodone and fentanyl patch and then --

14 A. It would appear, and then they took it and
15 subdivided it down to targeted audiences for that
16 promotion.

17 Q. Right. Okay. Thank you.

18 MS. KOSKI: You still good? Everyone good?

19 MS. RELKIN: Yeah. Is everyone good? I
20 think we should just go straight through 12:30,
21 unless someone needs a break then this is a good
22 time.

23 MS. KOSKI: So I did get a note that the
24 lunch will be here in a minute but it will wait
25 for us, so it's better for it to be here when you

1 want a break --

2 MS. RELKIN: Yeah, right.

3 MS. KOSKI: -- rather than it be late.

4 MS. RELKIN: Right. So when you get the
5 note it's here, you can let me know.

6 MS. KOSKI: I did. It's here but you go to
7 whenever --

8 MS. RELKIN: Oh, okay.

9 MS. KOSKI: Whenever you feel comfortable,
10 the lunch will be here.

11 MS. RELKIN: Okay.

12 (Anda-Williams Exhibit 9 was marked for
13 identification.)

14 BY MS. RELKIN:

15 Q. I've marked as Exhibit 9 a document numbered
16 629292 from your files, and as you can see, this is
17 an e-mail from Vickie Shalley to you and -- on
18 January 12th, 2010. And what is the subject matter
19 of the e-mail?

20 A. "Success Story - Oxy CR Made my Day."

21 Q. And do you see that Vickie Shalley -- and
22 that was a forward of an e-mail that Vickie Shalley
23 sent to a number of individuals at Anda, right?

24 A. Correct.

25 Q. And these were -- these were mostly -- were

1 these mostly sales reps?

2 A. These -- these were the sales reps on her
3 team.

4 Q. On her team. And it's the same subject
5 matter, Oxy CR Made my day, success story, and what
6 does she state?

7 A. She stated that these were Sam tips.

8 Q. What's a Sam tip?

9 A. A Sam was a senior account manager tip on a
10 way to boost sales.

11 Q. Okay. So that's -- that's what she said to
12 you, and in the earlier e-mail she advised people in
13 her sales unit, "It took only three customers to
14 order oxy today. Oxy CR added about \$13,000 in my
15 sales today!!"

16 Is that right?

17 MS. KOSKI: Object to form.

18 Q. And she provided two tips: Check sales
19 advantage with the oxy item and call those customers
20 that bought it in the past and check your remedy and
21 call all CSOS live customers.

22 Is that right?

23 A. Mm-hmm.

24 Q. Yes?

25 A. Yes.

1 Q. Okay and can you explain what those tips
2 mean?

3 A. What those tips mean is that -- Sales
4 Advantage was a platform system that allowed sales
5 reps to see the history of what their customers had
6 purchased and different products, and that's what he
7 was saying, check Sales Advantage for any customer
8 that they might have that was eligible to buy a CII
9 product and call those customers that bought it in
10 the past, and Remedy was another tool that they used
11 and what he was saying was that was anybody who was
12 on CSOS, call them and let them know that it's there
13 and if they want to order it, the customer will
14 order it.

15 Q. And what is Remedy?

16 A. Remedy was a call management system, but it
17 had many, many different uses. It not only provided
18 the platform for keeping the agents on call
19 schedule, it gave the sales reps the ability to set
20 the call for a certain time. Just a little bit of
21 additional education, the pharmacies that we called
22 on, typically, had time frames that they wanted --
23 that they requested to be called at. I might want
24 to be called at 11:00 o'clock in the morning, I
25 might want to be called at 6:00 o'clock in the

1 evening. Because they would accumulate orders at
2 their pharmacy all day long. And so some pharmacies
3 would only want to be called once, some were twice,
4 sometimes were more than that, and that allowed them
5 to be able to then call that order in to their sales
6 rep.

7 So Remedy was able to be set up that allowed
8 the sells reps to schedule those calls at
9 appropriate times and then there was a list of all
10 the calls and all the times that they had scheduled.
11 So that it helped to keep them on track and moving
12 from one call to the next and they were encouraged
13 to make sure that their Remedy was full, so they had
14 a full day of calling so that they were productively
15 occupied throughout the day.

16 Q. So it's basically a calendaring system for
17 the sales reps?

18 A. It's kind of like that, correct, and it
19 served other functions down the road, we expanded
20 it. It had a lot of functionality. Most call
21 centers do utilize a call management system of some
22 kind and this was the solution that we used at Anda.

23 Q. Do you know when those documents are
24 retained, the Remedy system?

25 A. I believe so.

1 Q. Let me just clarify, I misspoke when -- but
2 you understood what the document said. I talked
3 about Vickie sending the e-mail. The underlying
4 e-mail which talked about the success story was from
5 Erick Veloz, Senior Account Manager --

6 A. Correct.

7 Q. To Vickie; is that right?

8 A. That's right.

9 Q. And then it was, Vickie forwarded it to you?

10 A. Right. She sent it to her team and then
11 forwarded it to me.

12 Q. But when you answered the question, you
13 understood what you were looking at, correct?

14 A. Yes, I did.

15 Q. Okay. Thank you.

16 (Anda-Williams Exhibit 10 was marked for
17 identification.)

18 MS. KOSKI: We're going to break soon for
19 lunch. Are you okay?

20 THE WITNESS: Sure. I'm fine. I'm fine.

21 BY MS. RELKIN:

22 Q. Yeah, if you need a break, you let me know.

23 MS. KOSKI: Oh, did you not get one?

24 MS. RELKIN: Oh, whoops. My bad.

25 MS. KOSKI: I'm usually given the one with

1 the sticker. It's easier to keep track.

2 MS. RELKIN: Right. Right. The sticker is
3 here.

4 BY MS. RELKIN:

5 Q. Okay. So you take the time you need, but
6 for identification purposes what's marked as
7 Exhibit 10 is document number 635640, and it is
8 several pages again, it's double-sided, it goes
9 through page 645. Much of it is just a large number
10 of e-mail addresses.

11 I'm going to focus on the content after all
12 the addresses, which is on page 5644. Here we see
13 the subject matter of this e-mail is: Product
14 Update Relaunch of Generic OxyContin CR, which is
15 oxycodone CR, 10, 20, 40, 80 milligrams from
16 Actavis.

17 This product update is the kind of subject
18 matter e-mail you would get periodically?

19 A. Marc Falkin was the consummate promo
20 individual. He was always putting promos together,
21 coming from marketing and yes, this is very typical
22 of things that he would put together. Is it typical
23 of just CII? No, he did this with all kinds of
24 promos.

25 Q. So the product update was that there was a

1 limited relaunch of generic OxyContin from Actavis,
2 right?

3 A. Uh-huh.

4 Q. And he labeled this internal communication,
5 "do not fax or mail."

6 Right?

7 MS. KOSKI: Object to form.

8 Q. Do you see that?

9 MS. KOSKI: If you look on the screen, you
10 might be able to see it.

11 Q. Yeah, it's under the product update.

12 A. Internal communication, please do not fax or
13 mail.

14 Q. And in terms of the billing items, he said:
15 "No further discounts or rebates apply."

16 Does that -- I infer from that that there
17 was some discount already applying and no further
18 would be applied. Is that right?

19 MS. KOSKI: Object to form.

20 A. Uh-huh. Correct.

21 Q. Then he said, in terms of customer base:
22 Remember, a larger percentage of our inventory will
23 be made available to CSOS customers and then a
24 percentage of our inventory will be made available
25 to those customers who send in 222 forms.

1 So what is he distinguishing there?

2 A. What he is saying is that if the customer is
3 buying online through the CSOS portal, that they
4 were going to make the majority of the inventory
5 available to them and that there would also be some
6 percentage available to people who chose to use the
7 222 forms instead of using online.

8 Q. Does that mean that it was anticipated that
9 there would be more demand than inventory available?

10 A. That's what it seems to indicate, although I
11 don't intent -- recall the intent.

12 Q. And would you have an understanding why
13 there would be a preference to make more of it
14 available to the CSOS customers as opposed to the
15 customers who send in the 222 forms?

16 A. I don't know if that was because a lot of
17 the national account pharmacies were on CSOS, and so
18 just proportionately how customers were ordering
19 through us, more were ordering through CSOS than
20 through paper CII forms. That is what I am taking
21 out of it.

22 Q. Were the paper CII forms more for the
23 independent, smaller pharmacies?

24 A. No, anybody could use a paper CII form.
25 Any -- the difference was really, it's kind of like

1 getting older folks to utilize the new technology.
2 We had some older pharmacists that just refused to
3 hardly even touch an e-mail or do anything of that
4 nature. So getting them set up on CSOS was unheard
5 of. They liked their paper, they liked to fill out
6 the paper, send it in, have the order fulfilled,
7 sent back to them and that's the way they proceeded.

8 Q. Then under promotion right below that he
9 says: It's essential we try to add other CII
10 products to these orders, although not the only way
11 we will ship product. Our goal is to reward our
12 loyal CII purchasing customers as best as we can.
13 Yet use this OxyContin CR product opportunity to
14 increase our reach in the market.

15 Did I read that accurately?

16 A. Correct.

17 Q. And then there was an expiration date for
18 the promotion and the promotion was providing a 10
19 percent discount on Actavis fentanyl patches, seven
20 percent discount on Actavis oxycodone, 15 and 30
21 milligrams, and then a five percent discount on
22 Watson CII products.

23 Is that right?

24 A. Correct.

25 Q. And the fentanyl patches went from the

1 dosage of 25 to 50 to 75 to 100; is that right?

2 A. Correct.

3 Q. Does this help refresh your recollection
4 that there certainly was at that time period an
5 effort to promote CII products and have maximized
6 sales of them?

7 MS. KOSKI: Object to form. Go ahead.

8 A. Yes.

9 Q. And finally, in the back page, which is the
10 end of that product update, this is page 645, it
11 states: Product location. Product will only be
12 made available in Ohio. Thanks in advance to our
13 warehouse team for their work to make this launch
14 happen.

15 Do you understand why they were seeking to
16 make it at that point only available in Ohio?

17 A. Ohio was, for quite some time, the primary
18 warehouse location that had the largest capacity for
19 controlled substances. There were also -- there was
20 a capacity in the Weston office but it wasn't nearly
21 as big as the one in Ohio.

22 Q. So does this mean that it would only be made
23 out of the Ohio office but it could be shipped
24 elsewhere, or it was only to be shipped proximal to
25 that warehouse in Ohio --

1 A. It was only going to the Ohio warehouse.

2 Q. It was only going -- so was the Ohio
3 warehouse able to ship it anywhere or only ship it
4 to pharmacies within Ohio?

5 A. To anywhere.

6 Q. Okay. So when he says, "product will only
7 be made available in Ohio," that just means the Ohio
8 warehouse but it could go anywhere?

9 A. That is correct.

10 Q. Okay. And above that he did say: Please
11 keep promoting other Actavis fentanyl patches or the
12 non- CII Bupropion XL.

13 Right?

14 A. Yes.

15 Q. Okay. Do you have any recollection about
16 this particular promotional effort?

17 A. Does anything specific stand out in my mind,
18 no.

19 MS. RELKIN: Do you want to break for lunch
20 and then I can keep going or -- consensus -- yes.

21 MS. KOSKI: Looks like maybe.

22 MS. RELKIN: Majority wins.

23 THE VIDEOGRAPHER: Off the record at 12:09.

24 (Recess from 12:09 p.m. until 12:49 p.m.)

25 THE VIDEOGRAPHER: We're now back on the

1 video record at 12:49. This is the beginning of
2 Media 2.

3 (Anda-Williams Exhibit 11 was marked for
4 identification.)

5 BY MS. RELKIN:

6 Q. We'll mark another exhibit. Ms. Williams,
7 I'm showing you what's been marked as Exhibit 11,
8 which is number 635385, and it is -- I pushed the
9 wrong button here -- it's a three-page document
10 ending in 387. You will see that it's an e-mail
11 chain starting with the first e-mail is from you
12 11/13/09 to Wayne Tischler, Don Moore, Emilio
13 Medina, Vickie Shalley, Valerie Nemia and Allison
14 Libschtein.

15 And that group of recipients, they are all
16 in the sales department?

17 A. Those were all my sales manager.

18 Q. Yeah. And the subject was: Launch of
19 Generic Ultram ER Tomorrow.

20 A. Uh-huh.

21 Q. Do you recall this launch?

22 A. With the aid of this e-mail, yes.

23 Q. Okay. And you indicated that: "As you've
24 heard we are launching Ultram ER, tramadol ER,
25 tomorrow and expect to have both PAR and PATRIOT,

1 the AG, product in."

2 So is PAR and PATRIOT, the manufacturers,
3 the generic manufacturers?

4 A. Correct. Uh-huh.

5 Q. Okay. What does the next paragraph state?

6 A. "We need to get as many sales reps here as
7 possible for this launch. It would be good for as
8 many of you as can be here as well. Sorry for the
9 last minute notification but it is what it is."

10 Q. And the next paragraph states?

11 A. "This is a tremendous opportunity for us to
12 make up lost sales dollars and for sales reps to
13 supplement their monthly sales volume."

14 Q. Do you understand what kind of product
15 Ultram is?

16 A. It is a control product, yes, and this was a
17 Saturday launch.

18 Q. So what does that mean, Saturday launch?

19 A. That means that the majority of our sales
20 reps were not scheduled to be working. We only had
21 a fraction of our sales reps working, they worked in
22 rotation on a Saturday and we had limited hours,
23 from -- generally from 10:00 to 4:00, and they would
24 take turns, like every fourth or fifth week they
25 would work.

1 So we wanted to give everybody the
2 opportunity to come if they wanted to, it wasn't
3 mandatory but they were allowed and they were paid
4 the overtime if they had already exceeded their 40
5 for the week.

6 Q. Got it.

7 (Anda-Williams Exhibit 12 was marked for
8 identification.)

9 BY MS. RELKIN:

10 Q. I am marking another exhibit as Exhibit 12.
11 Here is a copy, and this is stamped number 634359
12 also from your files and it's a multiple page
13 double-sided document ending in number 634369. And
14 because -- well, the front of it indicates that it's
15 an e-mail from Brian Witte to Marc Falkin and are
16 you a recipient there?

17 A. Yes.

18 Q. Patricia Anda Williams, but we'll start with
19 the back. Again, it's one of these very long e-mail
20 listservs, is that for all the sales force?

21 A. Let's see here. The names on here are --
22 look like they are inclusive of both the Anda Meds,
23 which were the physicians side, some of them I'm
24 seeing on here. The -- wow. This went to
25 everybody, like in the whole company. Yeah, this

1 went to purchasing and pricing, everybody.

2 Everybody. It looks like he used an e-mail group
3 list to the whole company almost.

4 Q. Got it. And you said Anda Met --

5 A. Anda Meds, just think of it as the
6 physicians side of the business. They sold to
7 physicians, hospitals and so forth.

8 Q. Do they still or did they discontinue
9 physicians?

10 A. I cannot speak for what's going on now.
11 When I left, there were still two separate
12 divisions.

13 Q. But they were, at a certain point in time,
14 they were not selling CIIs to physicians; is that
15 correct?

16 A. Correct.

17 Q. But they were selling other products?

18 A. Correct.

19 Q. Got it. Okay. And just for time frame, it
20 is, as you can see, 2009?

21 A. 2009, correct.

22 Q. Okay. So turning to the content of this
23 very large e-mail, this is another product update,
24 relaunch of generic OxyContin for 10, 20, 40, 80
25 from Actavis; is that right?

1 A. Correct.

2 Q. And this is another internal communication,
3 do not fax or e-mail, right? I'm on page 368 near
4 the back.

5 A. Okay. I see it. Okay.

6 Q. Do you see that Marc Falkin indicates:
7 Sometimes toward the end of next week, approximately
8 December 3rd or 5th, oxycodone CR, the generic for
9 Purdue's OxyContin CR, will be launched by Actavis.
10 Their ability to launch the product is based on a
11 settlement with Purdue that will enable a limited
12 amount of inventory in the market. Anda/VIP will
13 have a limited supply of this new allocation to
14 service our customers.

15 Do you recall this launch?

16 A. Via this e-mail? Yes.

17 Q. And going down to the bottom section here it
18 talks about internal promotion. Do you see that:
19 Sometimes toward the end of December, but likely
20 January, a limited amount of Actavis oxycodone CR
21 will be made available by rep from our
22 initial allocation of product -- depending on your
23 sales of Actavis fentanyl patches or the non-CII
24 Bupropion XL 150mg and 300 mg.

25 So what does that mean, this internal

1 promotion?

2 A. Well, Marc was, again, the marketing -- the
3 marketing director at the time, and he was always
4 coming up with promotions for all things. This
5 looks like his idea, recommendation. Let's see
6 here. Like I said, he sent it out to everybody.
7 This was his idea of putting a promotion together
8 for these products when they came in, which we had
9 launches all the time, sometimes once a week,
10 sometimes two, three times a month, sometimes once a
11 month. So having promotions in and around a launch
12 period was not unusual. They were considered launch
13 initiatives and our manufacturers were asking us
14 to -- they gave all the, you know, all the details
15 on when the products were arriving so that we knew
16 how to plan the sales force.

17 Q. Okay. But there was -- there was -- this
18 internal promotion suggests that it would be
19 priorities given to getting this limited amount of
20 the Actavis oxycodone available based upon the
21 individual sales rep's sales of the Actavis fentanyl
22 patches or the non-CII Bupropion; is that right?

23 A. That's what I'm reading here.

24 Q. Okay. So do you understand the basis for
25 that, if someone was doing well in selling the

1 fentanyl patch and the other product, that they
2 would have a leg up in getting access to the
3 oxycodone?

4 MS. KOSKI: Object to form.

5 A. The way I interpret this is that if you were
6 selling the Actavis fentanyl patch, you probably had
7 a pharmacy that was utilizing them, because they're
8 not going to buy them if they don't have a script
9 for them, so those were considered opportunities to
10 be able to introduce that other product because they
11 were utilizing the fentanyl patch.

12 Q. Got it. Then he just said: "There is no
13 defined formula yet, just a good faith scenario that
14 those who also promote these other Actavis products
15 could pick up some additional oxy CR inventory to
16 sell as you see fit. Details to follow."

17 Do you see that?

18 A. Uh-huh.

19 Q. And he was leaving the discretion of sales
20 reps to sell as they see fit, right?

21 MS. KOSKI: Object to form.

22 A. When we say "sell as they see fit," again,
23 on the CIIs they were not -- they could call up the
24 customer, mention it to them, but the customer would
25 be the one that would activate the need --

1 Q. Right.

2 A. -- based on scripts they had in the
3 pharmacy.

4 Q. And then this -- on product location, it
5 also said, product will only be made available in
6 Ohio, and again, like we established with the prior
7 exhibit, that means your Ohio warehouse?

8 A. Correct.

9 Q. But available to distribute anywhere?

10 A. Correct, correct.

11 Q. Okay. That's it for this exhibit.

12 (Anda-Williams Exhibit 13 was marked for
13 identification.)

14 BY MS. RELKIN:

15 Q. Another exhibit, this is -- is this 13?

16 MS. KOSKI: Stretching exercises just to get
17 the exhibit.

18 Q. We've marked as Exhibit 13, a document from
19 your files numbered 610604, and it goes through,
20 again, double-sided, and it goes through 614 and --

21 MS. KOSKI: This is not the same --

22 A. I think this is related to the same --

23 MS. KOSKI: She can ask you --

24 A. One is from Marc Falkin and one from Brian.

25 MS. KOSKI: It looked similar to us but not

1 identical, different Bates number anyway.

2 Q. Yeah. Hold on a second. Yeah, I'm just
3 focusing on one part here, but does this relate to
4 the same promotional effort?

5 A. Yes, it appears to be.

6 Q. Same -- same topic, December 1st, and maybe
7 it's redundant but I had this marked for the comment
8 that was said by Marc Falkin to those on the e-mail,
9 including yourself: We can make it a December event
10 regardless if we have enough oxy CR, which we
11 won't...

12 What -- how do you read that comment?

13 MS. KOSKI: Are you asking if you read it
14 correctly?

15 Q. No, I'm asking a question. Do you
16 understand what he meant by "which we won't"?

17 A. Marc was always one of the first to find out
18 what inventory of product we were or were not going
19 to get. So it could have been that we were
20 anticipating a larger share of inventory coming in
21 and then that changed. That happened all the time,
22 where we expected a certain amount but then we got
23 significantly less.

24 Q. Yeah. Or it could have been that it was
25 known that there was a lot of demand for OxyContin

1 and you had a sweet amount and you knew with the
2 special pricing, it's going to get gobbled up in the
3 market, right?

4 MS. KOSKI: Object to form.

5 A. I can't speak to what his intent was on this
6 e-mail. I remember that there were a lot of ups and
7 downs in the market in inventory, inventory.

8 Q. Inventory-wise, but in terms of demand for
9 OxyContin, from the time you were at Anda until you
10 left, did you ever see a drop that all of the sudden
11 there was less demand for oxy?

12 MS. KOSKI: Object to form.

13 A. I personally did not watch those -- those
14 trends, because that was handled by our compliance
15 team. I just know we sold a lot less because we had
16 a lot of customers that either we decided to not
17 sell to anymore for whatever reason, or they never
18 returned questionnaires to us. I can't -- I can't
19 say.

20 Q. But in terms of the demand, you're not
21 suggesting that you had any reason to believe that
22 demand was diminishing for OxyContin?

23 A. I can't speak to the demand because I don't
24 know what was going on. We only saw one little
25 piece of the Anda side.

1 Q. And then Marc Falkin was proposing a contest
2 for the reps as follows, and then he said: Rep rank
3 Sams, Rep rank up to 40, 41, rookies and rookies,
4 and essentially what was he saying?

5 A. He was saying like we did for almost all of
6 our other product launches, we had contests galore
7 going on, daily, hourly, on calls, call time. It
8 wasn't necessarily based on sales. It could have
9 been anything having to do with the number of calls,
10 the outbound dials that they made showing their
11 effort to at least get the word out that we had the
12 product.

13 Q. So -- and the purpose was to incentivize the
14 sales reps to be aggressive in selling the product?

15 A. Correct, as was any launch product that we
16 did.

17 Q. Then he gave an example. He said: You can
18 come up with the prizes. We add all the sales of
19 non- oxy CII products on these orders and assign
20 points by item, and then he went on to say, for
21 example, Actavis fentanyl patches item rank, blank,
22 XXXX.

23 Right? Is that right, that's what it says?

24 A. That's what it says.

25 Q. Okay. Okay. We can move on to the next

1 exhibit.

2 (Anda-Williams Exhibit 14 was marked for
3 identification.)

4 BY MS. RELKIN:

5 Q. I've just marked as Exhibit 14, a stamped
6 document 619354 through 357, double-sided, and this
7 is an e-mail chain, on the front page, it's forward
8 of a title called, July Marketing Driver, and it's
9 dated August -- the top is dated August 5th, 2009.
10 The earlier e-mails may be the day before, and it's
11 from you on the top. Is that right?

12 A. Correct.

13 Q. Okay. And if we go to the earlier part of
14 the e-mail that was forwarded, it was -- it was --
15 it was forwarded by Ken Fenster but it was from
16 Kim --

17 A. Kim Bloom.

18 Q. Is that right?

19 A. Uh-huh.

20 Q. And that's actually dated, July 1st of 2009;
21 is that right?

22 A. July -- yes, Kim's e-mail was to Ken on the
23 1st of July, correct.

24 Q. And Kim was saying, should any sales rep
25 have any questions in regards to this driver, please

1 see your manager, and then she talks, quote: As an
2 extra kicker, should you hit all three components of
3 these marketing drives -- driver number, dollars,
4 right is that a dollar sign next to driver?

5 A. I think that's just drivers.

6 Q. Is that just an S?

7 A. That's what it looks.

8 Q. It's a capital S. Okay. Oops. Sometimes S
9 is used as a dollar sign in some of the e-mails; is
10 that right? Have you seen that?

11 A. Rarely. Personally, I've rarely seen an S
12 for a dollar sign.

13 Q. "We'll pay an extra 10 percent of your PMs
14 that are tied to the marketing driver, which is 25
15 percent of your overall PMs. Do your best to hit
16 all three and earn more \$\$\$\$\$\$."

17 Is that right?

18 A. Uh-huh.

19 Q. Okay.

20 A. But I don't know what the driver was. Let's
21 see -- oh, the driver is in the back. Okay, got
22 it.

23 Q. Do you see what the driver is?

24 A. I see it.

25 Q. And what is the driver?

1 A. There were several.

2 Q. They are?

3 A. They had to sell five account -- a must buy
4 five-line promo to five different accounts; number
5 two, go to sales advantage, identify 10 customers in
6 your account base that have never purchased one of
7 the items below. If these 10 customers buy one of
8 the items they have never purchased, then you
9 qualify. For example, if four of the 10 customers
10 orders -- must have been an item number, of
11 number -- four of the 10 customers order another
12 number -- another item number, one customer orders a
13 Qualitest oxy and orders one Actavis oxy, then you
14 qualify. Any number of 10 accounts will qualify as
15 long as each of the 10 accounts has never purchased
16 one of the items below.

17 Or, sell to two more customers than your
18 retention goal.

19 So I think that this is an S when you look
20 at this, because there were marketing drivers versus
21 marketing driver dollars.

22 Q. And we're dealing with OxyContin, right, or
23 oxycodone?

24 A. Was one of the ways to qualify.

25 Q. That's it for that document.

1 (Anda-Williams Exhibit 15 was marked for
2 identification.)

3 BY MS. RELKIN:

4 Q. I'm marking Exhibit 15. This is
5 fast-forwarding 2009 to 2013. This is a document
6 stamped 111359 through 361, and do you see this is
7 an e-mail on the top from Marc Falkin to a number of
8 individuals, including yourself, and the subject is:
9 CII Products Available in Florida Warehouse 20.

10 Do you see that?

11 A. Uh-huh.

12 Q. Okay. And do you see it indicates on the
13 bottom of that first page: Sales managers, attached
14 you will find a list of accounts by rep that have
15 purchased the CII items listed below through
16 warehouse 37. We have good inventory here in
17 Florida, warehouse 20, that will need help moving
18 out. Please distribute the list to your reps and
19 have them make contact with these accounts. We have
20 plenty of CII packets with return envelopes to
21 Florida in stock. More will be added today, that's
22 in italics, so the reps can send these out to their
23 customers. These accounts have purchased the items
24 listed below within the past 120 days.

25 Do you recall this promotion?

1 A. With the aid of this e-mail, yes.

2 Q. And in addition to that, Ohio warehouse is,
3 obviously, a warehouse in Florida, right? Multiple
4 warehouses in Florida?

5 A. We had a warehouse in Weston.

6 Q. And that's the one that's being referenced,
7 that number, warehouse 20?

8 A. That's correct, and the reason that this was
9 done was because you cannot use a CII form for
10 Florida if the customer had a CII form from Anda for
11 Ohio. So a brand new set of forms would have to be
12 sent to the customer to be able to purchase and have
13 that order fulfilled out of the Weston warehouse.

14 Q. And then the products that were listed,
15 there is two page of listings, Adderall is a
16 controlled substance, is it not?

17 A. Yes.

18 Q. And Concerta and Dexedrine, are those
19 controlled substances, as far as you know?

20 A. I would have to double-check on that one. I
21 don't --

22 Q. Look on the next page, an easy one,
23 Duragesic? You know that that was --

24 A. Yeah.

25 Q. That was an opioid, right? And then

1 oxymorphone, that's an opioid as well, correct?

2 A. Yes, all these -- I believe all these are
3 CIIIs.

4 Q. And Percocet, until you get to Ritalin,
5 which is -- which is the control but not a CII; is
6 that right?

7 A. I would have to double -- I would have to
8 refresh my memory, it has been a couple of years on
9 what category these are in.

10 Q. Sure, but most of the drugs on this page are
11 indeed opioids, right?

12 A. Uh-huh.

13 Q. And essentially this e-mail -- the
14 underlying e-mail was from Lori Sorenson to the
15 sales managers, correct?

16 A. Correct.

17 Q. And her goal was that we need help moving
18 out. She's talking about moving out these
19 controlled substances to pharmacies who would then
20 sell it to patients, right?

21 MS. KOSKI: Object to form.

22 A. Correct. Maybe they had excess ware --
23 inventory in the warehouse 37, and they were trying
24 to switch the customer from ordering what they would
25 normally order out of 20 and have them order out of

1 the Florida warehouse instead. It was not in
2 addition to, it was where the source of that product
3 was that they were going to be ordering.

4 Q. Well, they were encouraging them to write
5 letters to their customers, right?

6 A. They were encouraging them to contact their
7 customers and to send CII packets for the Florida
8 warehouse, because those forms, those 222 forms
9 could not be used -- the ones that the customers had
10 could not be used in Florida. They would need a
11 whole new set of forms.

12 Q. You were there a long time, so there's a lot
13 of e-mails. Sorry.

14 (Anda-Williams Exhibit 16 was marked for
15 identification.)

16 BY MS. RELKIN:

17 Q. The next exhibit is 16. That's for me.
18 That's for you. Most of the e-mail -- most of it is
19 an address list.

20 A. This is the same one that we covered before.

21 Q. Is it?

22 A. Uh-huh.

23 Q. That's December 8th?

24 MS. LUND: Copies?

25 MS. RELKIN: Yeah.

1 MS. KOSKI: Let me -- although I can still
2 have a copy because Patricia's doing my job and
3 her job here. Is this voicemail the same date?

4 THE WITNESS: Yes.

5 Q. It's discussing the same thing, but here
6 what I wanted to ask you about is you said voice
7 mail, that wasn't the identical exhibit, just the
8 same topic, right?

9 MS. KOSKI: It's the same Bates number.

10 MS. RELKIN: My bad. My bad. Why don't
11 we -- can we just -- we'll just reuse Exhibit 16.
12 We will just destroy this. There is no reason to
13 mark the same exhibit twice. Okay.

14 MS. KOSKI: Because I think it's identical
15 to Exhibit 10 that you already marked.

16 MS. RELKIN: Okay. Okay.

17 BY MS. RELKIN:

18 Q. And then let me just ask you, the top -- the
19 same exhibit said: "Voicemail message sent as
20 requested."

21 Do you know what the voicemail was?

22 A. The content was? I can tell you that Marc
23 always liked to follow up every one of the e-mails
24 that he sent out to the floor with a voicemail.
25 That was his protocol, and as the director of

1 marketing, we did our best to comply with his
2 wishes, and so what we would have done in that
3 scenario was to let them know what the promotion was
4 to make sure that they read their e-mail and got the
5 details of the promotion.

6 Q. All right. So I'm going to reuse the
7 Exhibit 16 stamp.

8 MS. KOSKI: Got it.

9 MS. RELKIN: Okay.

10 MS. KOSKI: Just like it didn't happen.

11 (Anda-Williams Exhibit 16 was marked for
12 identification.)

13 BY MS. RELKIN:

14 Q. I'm marking as Exhibit 16, a document
15 stamped 849833 through 835, and it's an e-mail
16 chain, the top is dated March 6th, 2013, and the
17 subject is: Launch Snapshot Suboxone Tabs Day 1,
18 and we can go first to page -- chronologically
19 earlier for the context, page 800 -- page 834. In
20 the middle of the page there is the e-mail from
21 Albert Paonessa and he is, do you want to explain
22 who he is?

23 A. He was the then president of Anda.

24 Q. And Mr. Brian Witte and William Versosky
25 and, again, it was Launch Snapshot Suboxone. And

1 the then president indicated that: "We sold 579
2 bottles, IMS monthly average for independents is
3 159,000 bottles, 579 seemed low for launch day.
4 Thoughts?"

5 So is it fair to say that Albert Paonessa
6 was concerned that we just didn't sell enough of the
7 Suboxone?

8 A. He thought it was low, yes, according to the
9 e-mail.

10 Q. And by the way, IMS, are you familiar with
11 what that is?

12 A. It's a database of drug use and average
13 uses. We used to -- I personally didn't have access
14 to it but I know the marketing department and some
15 of the leadership team had access to it. I think
16 Bill Versosky had access to it, which is maybe why
17 he was copied on this and it gave us average usage
18 of items throughout the United States, not just in
19 Florida or in Ohio.

20 Q. That's why he was able to discern that the
21 amount of bottles you sold during this day one was
22 what he perceived to be low based on a monthly
23 average, nationally?

24 A. Correct.

25 Q. Do you know what Suboxone is?

1 A. It is a controlled product.

2 Q. It's also a CII, right?

3 And then you responded to that, first
4 looking at the top -- the bottom of the first page,
5 you responded on March 6th saying -- what did you
6 indicate?

7 A. To Brian, I said: We had about 4,000
8 eligible customers to purchase this control item,
9 call volume for most was above average, goals in
10 place at the sales manager level, contest points in
11 place, PM's in place for pre-booking efforts,
12 raffles/spins going on every hour, I'm meeting with
13 all the sale managers at 10:00 and assigning
14 goals for every sales rep level as discussed
15 earlier. The most common thing we heard was that
16 most customers have switched over to using the film
17 rather than the tablets.

18 Q. What did you mean by, "switching over the
19 film rather than the tablets?"

20 A. There was a different kind of product that
21 they were purchasing instead, and then that was
22 clarified to me by Ken Fenster who said that he
23 should have told us earlier that they stopped making
24 the brand tabs a few weeks back anticipating the
25 launch that was occurring, and that in the meantime,

1 some of the customers had switched over to the film.
2 So selling to those customers can -- asking them to
3 go back to the old product was difficult. That was
4 the feedback we were hearing from the floor.

5 Q. The film was just a little thin strip that
6 would be put under the tongue?

7 A. Correct.

8 Q. Okay. And then you indicated above that, at
9 11:22 a.m.: "Wanted to add that we are proceeding
10 with disciplinary action on a few sales reps whose
11 call count was unacceptable."

12 A. Yeah.

13 Q. So does that mean you were going to
14 discipline sales reps who did not make sufficient
15 efforts and did not achieve the sales of Suboxone as
16 desired?

17 MS. KOSKI: Object to form.

18 A. Not the sales. For every launch, every rep
19 was expected to put their all-out effort, calling
20 their entire database of customers for whatever the
21 launch was. It didn't matter whether it was a
22 regular generic, whether it was a brand, whether it
23 was a CII. If they were -- whatever product they
24 were eligible for, that was their -- that was their
25 mission. Occasionally we would have reps that would

1 make an excuse for why they didn't make the all-out
2 effort, and to us on a launch day, that was
3 unacceptable because it was a known thing. We did
4 launches all the time, and first day and second day
5 launch activity was critical for us to be able to
6 capture sales.

7 So if we felt somebody was underperforming
8 or had showed lack of an effort, we may have given
9 them a verbal warning and said, "come on, get with
10 the program, put your effort into this, you're in
11 sales, this is what we expect you to do."

12 Q. Disciplinary actions would just have been a
13 verbal warning?

14 A. Yes, unless they had already previously had
15 something like that similar for another launch, and
16 then we would have gone down maybe the next level of
17 corrective action.

18 Q. And the earlier reference to raffles, that
19 was on the sales floor?

20 A. We had things -- could I back up a second?

21 Q. Sure.

22 A. Okay. As part of an education for call
23 centers, call centers are extremely tedious. There
24 is a lot of energy, there is a lot of excitement.
25 There is lot of motivation that's required to keep

1 people on the phone. Basically chained to your desk
2 with a phone, and to keep that drive going all day
3 long, day in, day out, month in, month out.

4 We had contests going on all the time. Two,
5 three, four, five different kinds of contests,
6 sometimes, one for call count, one for talk time,
7 how long did they actually keep the customer on the
8 phone, did we actually make something or did we just
9 dial, some for sales, obviously. We were in sales,
10 that's what we do.

11 We had a wheel that's like one of those
12 wheel of fortunes, and it had little elements on it
13 and if they did well in a certain area or their name
14 was picked from a raffle, we allowed them to go up
15 and make a spin. And their spin might have been
16 they got an extra half an hour for lunch or they
17 might have gotten a casual day, wear jeans for the
18 day, or they might have earned a \$10 gift card. So
19 it was something to keep them motivated and keep
20 them going. That's how sales organizations and call
21 centers typically work. Lots of contests, lots of
22 praise, lots of fun, keep the motivation high.

23 MS. KOSKI: Just like law firms.

24 A. If we don't they get discouraged and they
25 just become unhappy and leave.

1 Q. What was the average retention of a sales
2 rep?

3 A. When I came on board with Anda, I was used
4 to a retention in the SunTrust world of less than
5 three years. When I came to Anda, I was amazed at
6 how long their people were in the position. In
7 fact, I almost made the comment, I remember one time
8 to Kim Bloom saying, are we sure this is a good
9 thing, because the average was seven-and-a-half
10 years. That's uncall -- that's unheard of in sales.
11 Typically, it's one to two years. That's an
12 industry standard.

13 And the fact that they were in the position
14 that long showed us a number of things: That they
15 really liked what they were doing, they felt they
16 were being rewarded for it, they enjoyed the
17 position, and they wanted to keep doing it, and they
18 loved their customers. And they continued to show
19 that longevity.

20 Q. They make good money selling the
21 pharmaceutical products.

22 A. They did, but they had to work for it, and
23 again, they had virtually very, very little base
24 commission, base pay. Their base was very, very
25 low.

1 Q. Right. So their base was you said \$9, and
2 90 percent of their income would be --

3 A. Be commissions.

4 Q. That's -- per hour, that adds up. If \$9 was
5 just 10 percent, that's a pretty good hourly wage.

6 A. Okay.

7 Q. Right?

8 A. Yeah. And it depends on the size of the
9 book that they had.

10 Q. And did they also get stock options?

11 A. No.

12 Q. That's only for the managers?

13 A. No.

14 Q. You got stock options?

15 A. I did.

16 Q. Weren't you in management?

17 A. I was. Yeah. I'm sorry. Did I
18 misunderstand the question?

19 Q. Yeah. I said that was only for management?

20 A. Correct.

21 Q. Did you ever have any sales reps who said
22 that they had a moral or ethical problem promoting
23 opioid products?

24 A. That came to me and expressed that? No.

25 Q. Did you hear about that anywhere in the

1 company?

2 MS. KOSKI: Object to form.

3 A. I do not recall. It doesn't ring a bell. I
4 would need something to jog my memory if something
5 like that happened, but it doesn't come top of mind.

6 Q. And do you personally know anyone, or did
7 you know of anyone in the company, who lost a family
8 member or friend to opioid overdose?

9 MS. KOSKI: I'm going to object. I'm going
10 to instruct you not to answer, the relevance of
11 that question, that's just a harassing question.

12 MS. RELKIN: It's discovery.

13 MS. KOSKI: You don't have to answer that
14 question. What's the relevance of someone else's
15 personal family member's health to the --

16 MS. RELKIN: It's not generically health,
17 it's whether she knew anyone who --

18 MS. KOSKI: Anyone in the world, what does
19 that have to do with this case?

20 MS. RELKIN: Personal friends/family of her
21 or other folks in the company.

22 MS. KOSKI: You don't have to answer that
23 question if you're not comfortable answering it.

24 A. I don't recall anybody coming forward.

25 (Anda-Williams Exhibit 17 was marked for

1 identification.)

2 BY MS. RELKIN:

3 Q. It's kind of small font. The good news is
4 the small font part on the top you don't have to
5 worry about because that was a different witness.
6 We'll focus on the larger font, which was your
7 e-mail. So this is Exhibit 17, number 566549
8 through 550 -- no, through 551. And the bigger font
9 is an e-mail relatively bigger font, do you see
10 that?

11 A. Uh-huh.

12 Q. From you to Anda Pharmacy Group, Anda New
13 York Sales and Anda West Coast Group.

14 A. Uh-huh.

15 Q. So that's a pretty large listserv; is that
16 right?

17 A. All of these three groups comprise all of
18 the pharmacy team.

19 Q. Just sales or beyond sales?

20 A. No, no, just sales.

21 Q. And what did you say?

22 A. I said that: We've just been made aware
23 that control limits for your control eligible
24 customers will no longer be visible through TPS
25 order entry or Andanet. Note, this does not mean

1 there are no limits. There will not be a hard stop
2 at order entry in TPS or through Andanet moving
3 forward. However, all orders containing controlled
4 substances will be subject to review by our
5 regulatory compliance team. If you receive a
6 scheduled drug order quantity from a control
7 eligible customer that is not significantly -- that
8 is significantly higher than normal for that
9 account, please proceed to key that order which will
10 be reviewed by our regulatory compliance team. If
11 additional follow-up is necessary, you will be
12 contacted by the regulatory compliance and/or we
13 will discuss with your customer as necessary.

14 Q. So what did this mean that, "control limits
15 for your control eligible customers will no longer
16 be visible through the TPS order entry and Andanet?"

17 A. Okay. If you turn to the second page, this
18 is a screenshot from TPS. TPS was short for Turning
19 Point System, that was the order entry system that
20 the sales reps used. If you will see that item
21 number 7 in the center block, that used to --

22 Q. There, the blank item?

23 A. Correct. In that space used to have the
24 ability for the sales reps to hit function 7 key and
25 at which point they would be able to see all the

1 different control families and how much of that
2 family that the customer had used. That function
3 was removed from TPS. It was a management --
4 executive management decision. Obviously, we only
5 found out about it after it had been taken off. It
6 did not mean that those control limits went away.
7 All it meant was that the orders would flow through
8 and that the compliance team was going to be
9 reviewing every order before it went out.

10 Q. And what was the reason for removing 7 for
11 the sales force?

12 A. I don't know the full management decision.
13 I wasn't part of the management decision on that.

14 Q. But there must have been some talk and
15 scuttlebutt when this change happened?

16 MS. KOSKI: Object to form. You can answer.

17 A. Okay. Whatever that scuttlebutt must have
18 been, I don't know that it was accurate. What we
19 thought may have caused it, we had no idea.

20 Q. What was the scuttlebutt that you did hear?

21 MS. KOSKI: Object to form.

22 A. The scuttlebutt that we heard was that they
23 just don't want us to see it anymore, and if they
24 don't see it, then they can't concentrate on it or
25 talk to the customer about it or say to the

1 customer, oh, I see that you're at 900 of your 1,000
2 pill limit, and have any kind of discussion. They
3 just simply would not have access to that
4 information anymore.

5 Q. And was it deemed inappropriate for a sales
6 rep to tell their customer, you're approaching your
7 limit, you need to have it raised?

8 A. No, it was not deemed inappropriate. Did we
9 want to make that the focus of the conversation?
10 No. Sometimes the customer would inquire, where am
11 I? They would lose track, they are putting orders
12 in every single day and sometimes they would forget
13 how many times they ordered a controlled substance
14 from us and especially when they are ordering from,
15 possible, multiple sources. And keep in mind too
16 that this would not include CIIs. Because CIIs were
17 not handled through TPS, this was only for your
18 Schedule IIIs, IVs and Vs.

19 Q. So how would -- the CII data was just not on
20 TPS at all?

21 A. Correct. The only thing that there was, was
22 on the very front screen, let's see if it even shows
23 it. No, this particular picture does not. There
24 was a section over on this right side, which is this
25 little box.

1 Q. Over here?

2 A. Yeah, this little box is hiding it. Behind
3 that box was where we could see whether or not the
4 customer was turned on for controls or not.

5 Q. I see.

6 A. There was a flag there. That, they could
7 see, they could also see whether the customer had
8 turned into us their questionnaire, their customer
9 questionnaire and so that it either had a yes and a
10 yes, or a no and a yes, or a yes and a no, or a no
11 and a no.

12 Q. But if they were turned on for controls, you
13 turned on only controls beyond II; you are talking
14 about III and IV?

15 A. It could include all controls.

16 Q. You could tell until TPS was -- this was
17 shut off to the sales reps, the sales reps could
18 tell, of course, whether the customer had controls
19 turned on?

20 MS. KOSKI: Object to form.

21 A. Yes.

22 Q. And that was okay for them to relay to their
23 customer?

24 A. It was okay because we were able to see
25 where the customer was and answer their questions.

1 Did we want them being proactive about it? No.

2 Q. Why did you not want them being proactive
3 about it?

4 A. Because in all honesty of where we were with
5 the situation of -- with controlled substances and
6 those dialogues that we were having with customers
7 and trying to not make that a focus.

8 Q. So the scuttlebutt was 7 was shut down for
9 the sales reps, it obviously was still available for
10 compliance?

11 A. Correct. They wanted to be the ones to make
12 the decision on whether an order should go through
13 or not, and we were fine with that. It allowed
14 sales to do what we do best, which was sell and let
15 somebody else worry about that.

16 Q. Up until this time period, May of 2013, when
17 this change was made, sales did have more of a role
18 in making those decisions?

19 MS. KOSKI: Object to form.

20 A. No. We didn't -- we weren't able to make
21 the decision as to whether or not the order would go
22 through or not. If the customer had the limit
23 available and the order was placed, the order went
24 through, not for -- not for a CII. Again, the CII
25 was a totally different process, but for a CIII, CIV

1 and CV, if the customer ordered it and there was an
2 acceptable limit left on that customer's limit, the
3 order would process.

4 Q. The part of the e-mail that's italicized,
5 your e-mail.

6 A. Okay.

7 Q. You said: If you receive a schedule drug
8 quantity order from a control eligible customer --
9 let's go to that page. This is the italicized
10 portion.

11 "If you receive a schedule drug quantity
12 order from a control eligible customer that is
13 significantly higher than normal for that account,
14 please proceed to key the order which will be
15 reviewed by our regulatory compliance team."

16 A. Yes, and that was direct from the compliance
17 team.

18 Q. And keying the order is just entering it
19 into the system?

20 A. Correct.

21 Q. Was there any requirement that they notify
22 compliance that, huh, this looks to be a
23 significantly higher than normal order, be on the
24 lookout?

25 A. No, because compliance -- it was our

1 understanding compliance had access to all the
2 customer's history and were able to see -- I never
3 saw those screens so I can't vouch for exactly what
4 they contained but I understand they were pretty
5 exhaustive.

6 Q. Did this change generate some concern within
7 the sales team?

8 MS. KOSKI: Object to form.

9 A. Any time we made a change on anything, the
10 sales reps got upset. Was this in particular
11 anything bigger than -- no. You know, the first
12 couple days, oh, I wish I could see it, I wish I
13 could see it. I wish I could see it. I would
14 always say why, why does it matter, put the order
15 through. We've got another set of eyes that's
16 watching it in the background, you don't have to
17 worry about that anymore.

18 Q. Did you come to learn that Christine
19 forwarded your e-mail to Vicki Mangus?

20 A. I didn't know that she forwarded it until
21 I'm seeing this right now.

22 Q. And this is the tiny print, but do you see
23 the last clause she said: Is there a potential that
24 we will report orders from them to the DEA as
25 suspicious?

1 A. Yeah. I see her -- I see her comments.

2 Obviously, there was dialogue going on between
3 Robert and her and, I think, it was specifically
4 regarding Walgreens.

5 Q. When -- have you ever come to learn of
6 specific orders being reported as suspicious?

7 A. I was not involved in the process of doing
8 anything behind the scenes to that order. The
9 compliance team reviewed it. There were occasions
10 when if a sales rep saw something, sometimes they
11 would mention it to their sales manager and the
12 sales manager would call compliance. Was that
13 happening every single order? I can't say it was
14 but I -- if somebody went from wanting 100 oxys and
15 suddenly they wanted to order 1,000 and the sales
16 rep saw that, knowing -- and through all of our
17 education with them, they may pick up the phone and
18 say, hey, I'm not sure about this order, but at that
19 point we were instructed, let it go, let it go,
20 don't worry about it, we have compliance on the back
21 end watching all of this.

22 Q. I appreciate that, but that's to compliance.
23 My question is if -- did you ever come to learn
24 whether compliance reported to the DEA?

25 A. Oh, I have no idea.

1 Q. Suspicious orders?

2 A. I have no idea, we were not privy to what
3 they did with the DEA.

4 Q. So during all your years there, did you ever
5 come to learn in any way that any particular
6 customer order was reported to the DEA as being
7 suspicious?

8 A. No, ma'am, I did not.

9 Q. Did you assume that there were some orders
10 that did get reported as being suspicious?

11 MS. KOSKI: Object to form. If you know.

12 A. I can't say for sure. I would hope that
13 some were. We had some customers shut down from
14 controls, so I can only suspect that it did make it
15 either into the decision-making mode either strictly
16 on the Anda part or with assistance from the DEA.

17 Q. And you would assume if a customer was shut
18 down by controls because their order tripped the red
19 flags it was too much, too much oxy, too much bad
20 combination, whatever?

21 A. Correct.

22 Q. You would assume that therefore it also got
23 reported to the DEA as a suspicious order, right?

24 MS. KOSKI: Object to form; asked and
25 answered.

1 A. I don't know what compliance's requirements
2 were with the DEA, so I really can't speak to that.

3 Q. Was that not discussed during those training
4 sessions?

5 A. What was discussed in the training sessions
6 was that they were in constant contact with the DEA.
7 The form that they were in contact with, how it was
8 conveyed, discussions, none of that where we shared
9 any privileged information on.

10 Q. Was there any time that you learned of the
11 DEA ever conducting an inspection at Anda?

12 A. We always found out afterward, two, three
13 weeks, sometimes later we would find out that they
14 had been there.

15 Q. Okay. So there were occasions where they --

16 A. We never knew ahead of time.

17 Q. How many occasions do you recall that you
18 learned that DEA was there?

19 A. I maybe heard two, three times, maybe, that
20 they -- we found out two to three weeks later, or
21 maybe the week later, that they had visited and it
22 would come up in conversation, not because it was a
23 general broadcast announcement to the -- you know,
24 to all the employees, which it was not.

25 Q. And did you ever see someone from the DEA?

1 A. Never.

2 Q. So it was more you heard again it was a
3 scuttlebutt thing, DEA was here?

4 A. Not a scuttlebutt because every once in a
5 while we would hear it from Robert Brown who had
6 said, "Look, we were just visited by the DEA."

7 Q. And did they ask for documents --

8 A. I have no idea. I have no idea how that
9 interaction went.

10 Q. During the time periods when the company was
11 being acquired, were there inspections?

12 MS. KOSKI: Object to form.

13 A. I do not know for a fact. I would assume
14 that there would be if you're taking over a company,
15 you want to learn all the aspects of that company,
16 but what level of detail and what inspections were
17 done as part of that due diligence, I don't know.

18 Q. You had no direct involvement in the
19 acquisitions; is that right?

20 A. None.

21 Q. Okay. You were never interviewed by anyone
22 regarding acquisitions?

23 A. Ung-ugh.

24 Q. Did -- so when you started it was Watson?

25 A. Correct.

1 Q. And then Actavis buys Watson; is that right?

2 MS. KOSKI: Object to form.

3 A. Watson, then Actavis, then Allergan, and
4 then -- that was during my reign. After I left,
5 then Teva acquired them.

6 Q. Okay. So during these transitions, did your
7 job functions and the functions of your department
8 change in any material way?

9 A. (Shaking head.)

10 MS. KOSKI: You have to answer verbally.

11 Q. No?

12 A. No.

13 Q. So there was no process change?

14 A. As it relates to?

15 Q. As a result of the acquisition by Actavis,
16 did you have to change any procedures because
17 Actavis liked things differently than Watson, for
18 example?

19 A. On the sales floor, no, no.

20 Q. It was all the same?

21 A. We continued calling our customers just like
22 we did. Customers would inquire about the
23 acquisition and obviously we shared the information
24 that we were given to share and, yes, it's going to
25 be happening but it's not going to impact the

1 distribution side. Anda really remained its own
2 unit through all of those transitions, so we were
3 really the least impacted.

4 Q. What about in terms of promotional efforts
5 or change in priorities to promote Actavis generic
6 drugs over other companies' generics, opioids
7 specifically?

8 A. I can't say there was any difference than
9 what we had experienced through Watson and then
10 with -- and then with Actavis and then with
11 Allergan. I mean, obviously, since they owned us,
12 there was a propensity to try to move those products
13 through their main -- one of their main distribution
14 centers, which was Anda, but it didn't stop us from
15 continuing to carry over 100 manufacturers. In the
16 last year that I was there, they brought in more
17 brands than the -- than the company had ever had in
18 terms of other manufacturers, other than Actavis or
19 Allergan.

20 (Anda-Williams Exhibit 18 was marked for
21 identification.)

22 BY MS. RELKIN:

23 Q. Now I'm going to get into issues about
24 control, when they get turned on, when they get
25 turned off and then evolve into the issue of

1 extensions.

2 A. Okay.

3 Q. Kind of all the continuum of the controlled
4 part as it relates to sales.

5 A. Okay.

6 Q. Recognizing that you're not in compliance.

7 A. Correct.

8 Q. So I'll mark as Exhibit 18 -- so I've just
9 marked as Exhibit 18 a document stamped 711549
10 through 550, and as you can see in the top, you sent
11 an e-mail on December 8th, 2011, to Brian Witte
12 regarding a particular pharmacy, Van Buren Pharmacy.
13 Do you see that?

14 A. Uh-huh.

15 Q. And going earlier in time to understand the
16 context, since this was a forward of other e-mails,
17 this is all regarding this Van Buren Pharmacy where
18 Arthur Kasdin indicated to Wayne Tischler that he:
19 "Shipped a control on December 2nd, 2011, they just
20 recently qualified for controls, now all control
21 items are in red. Please help."

22 So what does a control item in red mean?

23 A. It would mean that the order was not going
24 to ship.

25 Q. Okay. And when Arthur -- when Arthur said,

1 please help, what did that mean?

2 A. From the context of what I'm reading here,
3 they had turned them on for controls and then just a
4 few days later they turned them off, and that was
5 confusing to the sales rep as to why can they do it
6 a couple days ago and now they can't.

7 Q. And Arthur Kasdin, he's a sales rep?

8 A. He was a sales rep, he's since retired, and
9 Wayne Tischler was his sales manager. So he went to
10 Wayne saying, "Can you help me understand what's
11 going on here?" And even, obviously, from the
12 context, I did not even know what had happened
13 there.

14 Q. Yeah. So let's go to, to get a little more
15 information, Arthur Kasdin on December 7th, I guess
16 that's the next day, says: "They were approved last
17 week for controls. They got an increase this week
18 from 1,000 to 3,000 hydrocodone. What has changed
19 since a few days ago? I will probably lose all my
20 generic business with this account when I tell him
21 the news. If he were denied controls from the
22 beginning, everything would be okay. Can we at
23 least go back to the 1,000 limit on controls so I do
24 not have to lose an account that has been increasing
25 sales with us a lot since July. I've worked very

1 hard to develop a relationship with the tech to get
2 him to buy more from Anda. Please help. Thank you,
3 Arthur."

4 And then it looks like Wayne Tischler
5 forwarded this to you; is that right?

6 A. Correct. Uh-huh.

7 Q. And what did you say?

8 A. Well, first of all -- wait a minute. Hold
9 on a second. Denied controls. Just wanted you to
10 see this. I in turn forwarded this to Mike Cochrane
11 who is the head -- was the head of compliance and
12 asked if I could meet with him, because we -- this
13 was not the first customer we had heard that had
14 been turned off for controls and I wanted to
15 understand more so that I was prepared to answer the
16 questions from my staff.

17 Q. Right.

18 A. And my sales managers. Everybody was like,
19 what's going on?

20 Q. Right. So your direct quote was "There has
21 been influx of accounts turned off for controls this
22 week and I'm trying to understand what is triggering
23 these. Everyone is up in arms about their accounts
24 and lost generic business."

25 A. Correct.

1 Q. "But I know there must be a -- but I know
2 must be a sound process for what is being done."

3 A. Correct.

4 Q. And what happened thereafter?

5 A. It looks like this e-mail that Michael
6 received, he must, maybe, have sent to Brian,
7 because I didn't copy Brian on this, and then Brian
8 sent it back to me. So he had to have gotten it
9 somehow and said, did I get any information on this,
10 and then I said: "No, he never responded, I'll try
11 again today."

12 We had had a couple accounts that had been
13 turned off that week that had been with the company
14 for several years, quite a few years.

15 Q. Well, actually, you said: "We've had some
16 very long accounts shut off this week, some that
17 have been with us for over 10 years."

18 So what that means is these were long
19 standing customers who, at that time, their controls
20 were shut off, meaning they could no longer purchase
21 opioids from you?

22 A. Any controls.

23 Q. Any controls?

24 A. Any controls, not only CIIs but all
25 controls.

1 Q. And this must have been a fairly big deal on
2 the floor.

3 A. Well, of course. The root of this is in the
4 comment that Arthur makes that he's going to lose
5 all his generic business. That was the concern,
6 because they're commissioned salespeople. So if you
7 cut off controls and the customer gets upset, and
8 they pull all their business with me, I've just lost
9 a really, really good account and automatically my
10 pocketbook is hit.

11 Q. Right. So what happened here, do you
12 recall?

13 A. I do not recall. I do recall that the
14 compliance area went through complete reviews on a
15 regular basis in groups of accounts and were looking
16 to doing their due diligence since sometimes there
17 were groups of accounts that got turned off, and we
18 would inquire and find out that they had received
19 information from whatever source and made that
20 decision to turn them off.

21 What transpired, I mean there was an e-mail
22 here from Sabrina. Sabrina was in the compliance
23 area and worked for Mike Cochrane, and -- because
24 Arthur even sends it to Sabrina and Sabrina responds
25 back and says: "No, this was reviewed further and

1 determined that we should not sell controls to this
2 pharmacy going forward."

3 So they didn't give the specifics on it,
4 they just either found out something or investigated
5 something a little bit further that led them to make
6 that decision.

7 Q. Something further meaning, they found out
8 there was some problem with regard to this
9 pharmacy's sale of controlled substances?

10 A. Yes, sir -- yes, ma'am. I'm sorry.

11 Q. But some of these were -- this was a
12 customer of 10 years?

13 MS. KOSKI: Object to form.

14 Q. Correct?

15 A. Correct.

16 Q. So it's unknown for how many years there
17 might have been a problem with this customer?

18 MS. KOSKI: Object to form; mischaracterizes
19 the document.

20 Q. Is that right?

21 A. I can't say.

22 Q. Do you know whether that pharmacy, Van Buren
23 Pharmacy, whether Anda reported this suspicious
24 order to the --

25 A. I do not know.

1 Q. -- to the DEA?

2 A. I do not know.

3 Q. Would you expect that they did?

4 MS. KOSKI: Object to form.

5 A. I can't answer for their protocols with the
6 DEA.

7 Q. So sitting here, you don't know despite your
8 years of service at Anda, whether it was required
9 that when they discerned a suspicious order
10 concerning enough to shut off controls, whether they
11 also were required to report that to the DEA?

12 MS. KOSKI: Object to form; asked and
13 answered. Are you asking her a legal conclusion?

14 MS. RELKIN: I'm asking her knowledge.

15 MS. KOSKI: About a legal conclusion?

16 MS. RELKIN: She worked in a regulated
17 industry, yeah. It's not a legal conclusion.
18 It's guidelines and regulations governing her
19 industry.

20 MS. KOSKI: So Special Master Collins
21 ordered that you can't ask questions about
22 someone's interpretation of the law. I think
23 this question fairly calls for that. You don't
24 have to answer.

25 Q. I'm not asking for your interpretation. I'm

1 asking whether you were ever told by compliance at
2 Anda whether, when they shut down controls, because
3 it was a suspicious order, whether their protocol
4 also included reporting it to the DEA?

5 A. They did --

6 MS. KOSKI: That's a different question.

7 You can answer that one.

8 A. They did not share with us what their
9 protocol was with the DEA.

10 Q. And you didn't know one way or the other?

11 A. (Shaking head.)

12 MS. KOSKI: You have to answer out loud.

13 A. I did not know, no.

14 MS. LUND: Would this be a good time for a
15 break?

16 MS. RELKIN: Sure.

17 THE VIDEOGRAPHER: Off the record at 2:02.

18 (Recess from 2:02 p.m. until 2:14 p.m.)

19 THE VIDEOGRAPHER: We're now back on the
20 video report at 2:14.

21 (Anda-Williams Exhibit 19 was marked for
22 identification.)

23 (Discussion off the record.)

24 BY MS. RELKIN:

25 Q. So I've marked as Exhibit 19 a document

1 number 560415 and at the top you can see the e-mail
2 is from you to Robert Brown regarding Schaeper's
3 Pharmacy. Do you see that?

4 Now, if you want we can -- to understand the
5 technology here, the very first e-mail that you're
6 not on but is forwarded to you, is from Tasha
7 Campbell to Alison Libschtein and Wayne Tischler,
8 who the Tasha Campbell?

9 A. Tasha Campbell was one of the analysts in
10 Robert's area, Robert in the compliance area.

11 Q. Got it. And Alison Libschtein is in your
12 unit?

13 A. Alison and Wayne both were sales managers
14 that reported to me, yes.

15 Q. Right. Okay. And this is December 27th,
16 2013, and Tasha says: "We have an order for 800
17 oxycodone 15 milligrams that is being held because a
18 customer has not previously ordered such a large
19 quantity of this item. Please ask the customer to
20 provide us with the following. A written
21 explanation for the reason of the size of this
22 order, an updated customer questionnaire, the most
23 recent three month's dispensing report and SOPs."

24 Further up the e-mail chain it indicates the
25 person who would have been in the position to do

1 that, the main buyer, was not in that day. "His
2 concern is that we do not pull the DEA. He knows
3 that the order on hold will not be released and he
4 will communicate this with customer."

5 It looks like this e-mail that was from
6 Emilio Medina to Tasha Campbell got forwarded to
7 Anthony Pollio. Who is Anthony Pollio?

8 A. Anthony Pollio was one of our senior account
9 managers.

10 Q. And then he forwarded it to you, is that
11 right, on December 30th?

12 A. Correct.

13 Q. So this is kind of during Christmas, New
14 Year's week?

15 A. Correct. Correct.

16 Q. There is a little gap in time there. Then
17 you send an e-mail on December 30th.

18 A. To Robert.

19 Q. Right, to Robert and what do you say?

20 A. What I said was, I just made him aware of
21 what we had found out, that Tony Pollio had noticed
22 that the controls had been pulled from the customer:

--	--	--

■ [REDACTED]
■ [REDACTED] [REDACTED]
■ [REDACTED]
■ [REDACTED]

5 Q. So when you say, "Reinstate the controls to
6 allow us a few more days," that means you were
7 asking compliance to let them continue to get the
8 oxy until the paperwork comes in; is that right?

9 MS. KOSKI: Object to form. Go ahead.

10 A. We were just asking for them -- it was okay
11 for them to not release the order, but as long as we
12 could keep the controls open so that we allowed a
13 few more days to get all those documents that they
14 were requesting in the door, and get those to them
15 for a final decision.

16 Q. And when you said that they wanted to order
17 a few more bottles, what was your understanding of
18 how many -- what was the discrepancy, recognizing
19 that they asked -- they said, we have an order for
20 800, because the customer has not previously ordered
21 such a large quantity of this item.

22 So what's the -- what's the difference in
23 quantity that you're aware of when you described it
24 as "a few more bottles," which doesn't sound like
25 it's as big a deal?

1 MS. KOSKI: Object to form.

2 A. I don't recall the quantity. I don't
3 remember if they were 100s or a 200 bottle, what the
4 quantity size of the bottles was that they were

■ [REDACTED]

■ [REDACTED]

■ [REDACTED]

■ [REDACTED]

■ [REDACTED]

■ [REDACTED]

■ [REDACTED]

■ [REDACTED]

13 Q. Do you know where Schaeper's Pharmacy is
14 based?

15 A. I don't remember, ung-ugh.

16 Q. Okay. Then Robert Brown responded to you
17 and copied Tasha Campbell saying, this is on
18 December 30th, so it's your e-mail on December 30th
19 was 12:18 p.m. and then just a little bit more than
20 an hour at 1:22 p.m. Robert Brown says: "The store
21 is now eligible to purchase controls. We'll be
22 looking for all the requested information next week
23 in order to enable the customer to continue to
24 purchase controlled substances."

25 So controls was turned back on?

1 A. Uh-huh.

2 Q. Is that right?

3 A. Uh-huh.

4 Q. And then you sent an e-mail asking: "Are
5 you in today? I have the dispense data from this
6 customer to bring down to you."

7 A. We worked to get all the documents in by the
8 31st, which was the following day, obviously that
9 was around New Year's, New Year's Eve.

10 Q. And Robert Brown indicated he's not in but,
11 "you can slide it under my door and I will review it
12 on Thursday."

13 Does Robert Brown keep his door locked?

14 A. Yes.

15 Q. And do you know the reason for that?

16 A. I did not ever ask.

17 Q. Was there anyone else at Anda who kept their
18 door locked?

19 A. That I knew of? No, I never really tried to
20 go into anybody's office and go look in there. I
21 never attempted to go some place where it was
22 locked.

23 Q. But did you know before this e-mail that
24 when he said, "slide it under my door," that he kept
25 his door locked?

1 A. To be honest with you, I don't even think I
2 checked the door. I think his instructions were to
3 slide it under the door and that's exactly what I
4 did. I'm not even sure if I tested the door that
5 day.

6 Q. And then you did indeed slide it under the
7 door. Do you know what happened with this order?

8 A. I don't recall.

9 Q. Did they get approved?

10 A. I don't recall.

11 Q. And if you Google Schaeper's Pharmacy you
12 will see that they are based in Cincinnati, Ohio; do
13 you have any reason to disagree with that?

14 A. No.

15 Q. Did anyone in your department make a special
16 appeal to you for you to reach out to Robert Brown?
17 Was that Emilio Medina, did he come to you and --

18 MS. KOSKI: Object to form. You can answer.

19 A. Hold on a second. Give me a second here.
20 Because see, initially, Tasha sent this to Alison
21 and Wayne. Alison and Wayne were on vacation
22 because they always were off the same week, and
23 Emilio was the backup manager. So that's how it
24 wound up in Emilio's hands, he was one of the other
25 sales managers, so the attempt was made then to

1 contact the customer, the main buyer, who would have
2 been able to help us wasn't there, yadda yadda
3 yadda, and then Tony sent it to me.

4 I don't -- there's no comment here. I don't

█ [REDACTED]
█ [REDACTED] [REDACTED] [REDACTED]
█ [REDACTED]
█ [REDACTED] [REDACTED]
█ [REDACTED]
█ [REDACTED] [REDACTED]
█ [REDACTED]
█ [REDACTED]
█ [REDACTED]

13 Q. But when you indicated a few more bottles
14 sitting here, you don't know how many bottles, what
15 the discrepancy was?

16 A. No.

17 Q. Okay.

18 (Anda-Williams Exhibit 20 was marked for
19 identification.)

20 BY MS. RELKIN:

21 Q. Still on the topic of control request, this
22 is Exhibit 20, which is stamped 133286 and the
23 e-mails are in August and September 2011. Starting
24 at the beginning, there's an e-mail from Sabrina
25 Solis, she's in compliance, right?

1 A. Yes, correct.

2 Q. To Emilio Medina who we just talked about
3 and you are copied along with Emily Schultz and
4 Emily Schultz was who again?

5 A. Emily Schultz worked for Mike Cochrane.

6 Q. So she's in compliance as well?

7 A. Yes.

8 Q. And Sabrina said: "Today I had several
9 requests from Flora Pajon for controls for Florida
10 accounts. The appropriate dispensing data was not
11 attached on these requests. Please ensure that all
12 these requests have summarized dispensing data
13 attached or on file as this is necessary to review
14 the accounts."

15 And then you responded and what did you
16 indicate?

17 A. My comments were: Sabrina, we have not
18 automatically been sending dispense data for every
19 increase request or adjustment. If this is
20 something new we need to communicate that to the
21 entire sales floor both here and at VIP. We
22 typically supply the customer questionnaire, that's
23 a given and when certain opportunities for increases
24 and/or adjustments have been made, sometimes
25 dispense data is requested and that is done. I just

1 want to be sure that I'm clear on the direction
2 going forward.

3 Q. Okay. So up until that time period, it was
4 not routine for sales to obtain from the customers
5 their dispensing data for all customers?

6 A. For all customers, correct.

7 Q. Who are seeking an increase, only some?

8 A. We would do it when we were asked by
9 compliance to obtain it.

10 Q. So this was a change and then as far as you
11 are aware; is that right?

12 A. Uh-huh.

13 Q. And then what does Emily Schultz say to you?

14 A. Emily says: "Pat, nothing has changed since
15 our meeting in January. We still require dispensing
16 data for all new pharmacies. I cannot find the
17 e-mail communication you sent out to the floor in
18 January regarding this because of the new e-mail
19 size quotas but I believe it was on January 17th.

20 The specific issues Sabrina was e-mailing
21 about was that Flora submitted seven opportunities
22 today all for new pharmacies in the Miami area.
23 Only two had dispensing data attached. For new
24 pharmacies we must have dispense data."

25 Correct. That was not a change and perhaps

1 I was not aware that when these opportunities were
2 submitted, that they were for new pharmacies,
3 because that was part of our standard protocol.

4 Q. Yes. And then you followed up by, I think,
5 suggesting -- was that a meeting or a communication
6 to clarify protocol; is that right?

7 A. Yes, and what I said was I think that would
8 be really good. I wasn't -- I wasn't aware these
9 were for new pharmacies, so to my point what I just
10 said earlier.

11 So, no, that is no change from our existing
12 process, however I don't think that a touch base
13 with the sales managers would be a bad idea,
14 semiannual update so to speak.

15 Q. And then you suggested proposed topics?

16 A. Uh-huh.

17 Q. And skipping to three, it was clarification
18 on new pharmacies needing dispense data?

19 A. Uh-huh.

20 Q. That was really the subject of the e-mail?

21 A. Correct.

22 Q. Then: "What progress have we made as a
23 company getting control questionnaires in place? I
24 don't think I've seen any new waves of
25 questionnaires being sent out. Does that mean

1 they've all been sent out? What percent of our
2 control buying base do we now have questionnaires on
3 file for."

4 So was that a concern of yours, that some of
5 your purchasing customers you did not have the
6 questionnaires on file for?

7 A. We just noticed it when we were servicing
8 the customer. I would occasionally go into TPS
9 accounts for various reasons and sometimes I noticed
10 that the flag was still no, and it was really for my
11 understanding and to help the floor understand.
12 They were doing things in waves, we called waves of
13 mailings and I just wanted to get an update on where
14 they stood.

15 Q. And so -- and was it the responsibility of
16 sales to get the data, the dispensing -- the
17 questionnaires; is that right?

18 A. They asked us for our assistance.

19 Q. Let me rephrase my question. I had too many
20 terms.

21 It was the sales department's responsibility
22 to reach out and get the questionnaires?

23 A. Correct.

24 Q. But when you made that comment had you
25 received any nudges or complaints from compliance

1 about the missing questionnaires?

2 MS. KOSKI: Object to form.

3 MS. RELKIN: What's wrong with nudge?

4 MS. KOSKI: I had a problem with missing.

5 You can answer the question. I'm objecting to
6 form.

7 THE WITNESS: Oh.

8 A. Can we restate the question, please. Sorry.

9 Q. When you made that comment, had you received
10 any complaints from compliance about questionnaires
11 they had not received yet expected?

12 A. Where is that comment? Are we referring
13 to --

14 Q. Maybe you asked for progress about --

15 A. Correct.

16 Q. The company getting control
17 questionnaires --

18 A. Correct. Correct.

19 Q. And you asked what percentage of our control
20 buying base do we now have questionnaires on file
21 for?

22 A. Correct.

23 Q. Does that not suggest that you didn't have
24 them for all?

25 A. For all, correct.

1 Q. Okay.

2 A. That is correct. They were working on it.

3 It was a very tedious time-consuming process, I
4 know. They asked our assistance with it. We
5 were -- we were getting them in the door as we could
6 and I just wanted an update.

7 Q. Now, can you -- the next bullet point, can
8 you read that into the record?

9 A. Where it starts, the risks?

10 Q. Yes.

11 A. Okay. The risks -- the risks associated
12 with sending in a request for an increase -- oh,
13 that was one of the topics. I've just recently sent
14 the sales manager some information based on some
15 things I've seen occur when dispensing data is

■ [REDACTED]

■ [REDACTED]

■ [REDACTED]

■ [REDACTED]

■ [REDACTED]

■ [REDACTED]

■ [REDACTED]

■ [REDACTED]

24 MS. KOSKI: Object to form.

25 A. No, the topic that I asked for here was to

1 talk with the sales managers, because this was a
2 recommendation that we meet with the sales managers
3 to kind of do, a kind of, a midyear update. And I
4 just wanted to talk frankly with them about, you
5 know, we were getting dispense data, we're seeing
6 the whole nuts and bolts of what they are ordering
7 across the board, not just from us, but from
8 everyone. So when that happens, we will likely --

■ [REDACTED]

■ [REDACTED] [REDACTED]

■ [REDACTED] [REDACTED]

12 Q. Reality being not only were they getting
13 from you they were getting from all these other
14 places?

15 A. That's correct.

16 Q. They were purchasing from various sources?

17 A. And until we saw the dispense data sometimes
18 we didn't know that. We didn't see the aggregate
19 amount of everything that they were purchasing and
20 sometimes it was eye-opening.

21 Q. What is your understanding of, if you have
22 any, of when you were required to get dispense data
23 from customers for controlled substances?

24 A. Whenever compliance asked us to. Most of
25 the time that would come when we were being -- sales

1 reps were submitting what's called an opportunity or
2 that's a work order through a system called Remedy,
3 we talked about Remedy a little bit earlier. One of
4 the functions in Remedy gave the sales reps an
5 opportunity to submit to compliance a request for an
6 increase, or for a family that they were not
7 currently purchasing. That Remedy opportunity went
8 to the sales manager to ensure that it was being
9 completed correctly before it went to compliance.
10 So the sales manager would review it, make sure the
11 dispense data was there. If it was being requested,
12 or that the questionnaire was there, and then send
13 that on to compliance. Compliance would then review
14 it, they get back to us and send the opportunity
15 back to the manager and to the sales rep and say
16 either it was approved, declined or we need more
17 information, please get us dispense data.

18 Q. Do you know whether compliance was able to
19 get from IMS that dispense data on the particular
20 customers?

21 MS. KOSKI: Object to form.

22 A. I do not know.

23 (Anda-Williams Exhibit 21 was marked for
24 identification.)

25 BY MS. RELKIN:

1 Q. Okay. So what's marked as Exhibit 21 is
2 stamped 109644 and it's an e-mail from Alex Romero
3 to Vickie Shalley and then Vickie Shalley to Patrick
4 Cochrane, Jay Spellman and copied to you and then
5 response from Jay Spellman dated September 1st,
6 2010. And the topic was a particular account number
7 206671.

8 Is that right?

9 A. Correct.

10 Q. Okay. And do you see that Alex Romero

11 [REDACTED]
12 [REDACTED]
13 [REDACTED]
14 [REDACTED]
15 [REDACTED]
16 [REDACTED]

17 Do you see that?

18 A. Uh-huh.

19 Q. So that's a big decrease from 5,000 to
20 1,000?

21 A. Correct.

22 Q. But this was a new account that was with you
23 for only three months but their starting number was
24 5,000; is that right?

25 A. Correct. That's the way it appears.

1 Q. That's a high number for a new account,
2 isn't it?

3 A. There were set limits that were given and to
4 be honest, I don't know -- I don't recall what the
5 set limits were for new accounts. And this was only
6 opened September -- July, August -- this was only
7 opened -- this was like a six-week old account.

8 Q. Which started at 5,000 got ratcheted down to
9 1,000?

10 A. Correct. I have no idea -- no context here.
11 I have no idea why that change would have been made
12 or who would have requested --

13 Q. Trigger --

14 A. Something triggered it, something triggered
15 it and the only ones that would have had the ability
16 to reduce those at that time would have been a
17 member of the compliance team, and then Jay did have
18 access to -- I don't know why he was copied on this,
19 I don't really recall because Patrick -- Jay
20 reported to Patrick, and -- oh, you know what. I
21 believe that Mike was on leave of absence. I
22 remember he was on a leave of absence and for a
23 short time we were asked to send some things to
24 Patrick because Robert Brown was not yet on board.

25 Q. So Mike -- we're talking about Mike

1 Cochrane?

2 A. Correct.

3 Q. He was on a leave of absence so things were
4 going to his brother, Patrick Cochrane?

5 A. That's correct.

6 Q. Okay.

7 A. Yeah, right. And I think Jay was kind of
8 set up as an interim, from what I can remember, just
9 to kind of take a look at -- help us out.

10 Q. Vickie Shalley wrote to Patrick Cochrane and
11 Jay Spellman and copied you saying: "Could you
12 please take a look at this account for Soma and
13 hydrocodone."

14 Right? And Soma is --

15 A. Soma is a control but I don't recall what C
16 level it is.

17 Q. And you know that hydrocodone obviously --

18 A. Hydrocodone is a CII but the Soma, I
19 believe, is a lower -- is a higher control number.

20 Q. And you wrote back and why don't you read
21 for the record what you stated?

22 A. Yes. If they were just opened at the end of
23 July, I am surprised that they have the ability to
24 order controls at all. I say leave it as it is,
25 it's way too early to consider any increases at

1 all."

2 And that's based on the protocol we were
3 following at the time, where most new accounts did
4 not get control limits turned on until we had a
5 history.

6 Q. But this one did?

7 A. But this one did, but I don't recall if it
8 was a brand new pharmacy or it was just a new
9 pharmacy to us.

10 Q. Do you remember as a result of discovering
11 that this new customer got such a high amount so
12 quickly, whether that triggered any further
13 scrutiny?

14 A. I don't recall.

15 Q. And do you know whether this was reported to
16 the DEA as a suspicious order?

17 A. I do not know.

18 (Anda-Williams Exhibit 22 was marked for
19 identification.)

20 BY MS. RELKIN:

21 Q. It's a little one. Exhibit 22 is number
22 72179, and do you see that this is an e-mail from
23 you to Emily Schultz and Michael Cochrane on
24 March 8th, 2011?

25 A. (Nodding head.)

1 Q. Yes?

2 A. Uh-huh. Yes.

3 Q. And what did you indicate?

4 A. One of our sales reps, Maria Arango, felt
5 that the limit on the oxy may be set too high. I
6 don't recall what the limit was but we were -- asked

■

■

■

■

11 Q. Okay. You added some additional
12 information. Why don't you just read what the --

13 A. Okay. "The Sales Rep (Maria Arango) on this
14 account feels that the limit on the oxy may be set
15 too high. Can we --"

16 MS. KOSKI: Slow down a little bit for the
17 reporter.

18 THE COURT REPORTER: Thank you.

19 THE WITNESS: So sorry.

20 MS. KOSKI: Her fingers are smoking over
21 there.

22 A. All right.

23 THE WITNESS: Do you want me to repeat it
24 back?

25 THE COURT REPORTER: Please.

1 A. "The Sales Rep (Maria Arango) on this
2 account feels that the limit on the oxy may be set
3 too high. Can we reduce this limit to 1000? Looks
4 like they were purchasing a lot of oxy back in
5 May/June of 2010 and we don't want to open us up for
6 any issues."

7 Q. All right. What did you mean there, we
8 don't want to open this up for any issues?

9 A. Any reason why anything should look -- any
10 suspicious orders or if the customer would order
11 more.

12 Q. So the --

13 A. It's based -- based on the history of the --

14 [REDACTED]

15 [REDACTED]

16 that limit was. I don't recall.

17 Q. So this was just a limit, not what they were
18 purchasing?

19 A. That's correct, it's just the limit. Yeah,
20 we're not saying that they were actually taking
21 advantage of it or actually purchasing it, it's just
22 what the limit was set at.

23 Q. Do you recall having any discussions with
24 Maria Arango about what triggered her concern why
25 this should be reduced?

1 A. I don't. I'm not saying I didn't but I
2 don't recall.

3 (Anda-Williams Exhibit 23 was marked for
4 identification.)

5 MS. RELKIN: This is one of these horizontal
6 ones. This is one that didn't have a Bates
7 number, so we have a cover page up front. The
8 cover page was --

9 MS. KOSKI: Produced in native or something?

10 MS. RELKIN: Yeah, I guess that must be the
11 reason, or it looks like actually the original,
12 it looks like it was slightly cut off on the
13 bottom, if that's how the document was as
14 produced. So the document number is 554323 and
15 this is Exhibit 23.

16 BY MS. RELKIN:

17 Q. And do you see, Ms. Williams, this is an
18 e-mail from you on July 22nd, 2014 to Sabrina Solis,
19 Brian Witte, Dominic Floro and James Gatto copied to
20 a number of others from compliance on: Status
21 Update Collect Dispensing Data - Shared Accounts
22 Buying Groups.

23 And if you can just explain what a buying
24 group is?

25 A. A buying group was a group of pharmacies

1 that paid a fee to a -- what's called a group
2 purchasing organization to negotiate the best deals
3 for them on pharmacy and pharmaceutical pricing.
4 There were a number of those that were all managed
5 by a national account manager, such as the Epic
6 group, such as the IPA group, such as the KPPA
7 group, those are just a few, and they were a
8 consortium of pharmacies in a specific region.

9 The national account manager would determine
10 what kind of calling needs that group of pharmacies
11 would require, and they were called a shared account
12 if they were brought to the floor, my sales floor or
13 Dominic's sales floor up in New York, and asked to
14 make calls to those customers. So we developed a
15 relationship, our sales reps developed relationships
16 with those pharmacies at the request of the national
17 account team.

18 Q. You used the term "calling need." What does
19 that mean?

20 A. Calling needs? What their calling needs
21 were, meaning the Epic group or the KPPA group, the
22 management team of that group would meet with our
23 national account team and they would say, do you
24 want your pharmacies called? How often do you want
25 them called? Do you want them called once a day?

1 Q. Called on the phone?

2 A. Called on the phone. Do you want them
3 called three times a week? Do you want them called
4 twice a month? Those guidelines is what national
5 accounts would then relay to the sales reps who were
6 part of that team.

7 Q. So even though it was one overarching buying
8 group that negotiated the prices, Anda still had
9 individual contacts with those specific pharmacies
10 that were members of the buying group; is that
11 right?

12 A. That's correct.

13 Q. So your -- their needs were specific to
14 them?

15 A. Correct.

16 Q. It was just negotiated price?

17 A. Correct.

18 Q. And, therefore, did you need the same
19 documentation from them, questionnaires specific to
20 the pharmacy and dispensing data?

21 A. Correct, and that's what they were asking
22 for our assistance on. It said they did not have
23 dispensing data on file for these 200 some
24 locations.

25 Q. Let's go to that other page.

1 A. Okay.

2 Q. So this is Sabrina Solis?

3 A. Uh-huh.

4 Q. Is that right?

5 A. Uh-huh.

6 Q. And she's writing to you and to the others.

7 A. Mm-hmm. To Brian, to me, to my counterpart
8 in New York, that was Dominic Floro, and James Gatto
9 was in the Andanet department up in New York.

10 Q. So she says that: "The customers attached
11 are shared accounts; we do not have dispensing data
12 on file for these locations."

13 A. Correct.

14 Q. So they didn't know how much controlled
15 substances these perspective pharmacies had
16 received?

17 A. Correct.

18 Q. Had used in the past?

19 A. Correct.

20 Q. "Compliance has never attempted to collect
21 data from these locations since there is a business
22 type over each of these accounts."

23 So what does that mean?

24 A. That means that the national account team
25 had a business type, meaning that that -- that group

1 of accounts all fell under the national account
2 manager, and it was normally the national account
3 manager that would initiate the request for these
4 things.

5 Q. So compliance never did, it was supposed to
6 be national accounts?

7 A. Correct.

8 Q. And then in the next bullet point is: "Over
9 the last couple of weeks we met directly with the
10 national accounts team and we were advised that it's
11 best for the sales reps to collect data from these
12 customers."

13 Is that right?

14 A. Correct.

15 Q. And then: "All of these accounts are
16 affiliated with a buying group."

17 So it would appear that the data had never
18 been collected from national accounts or in any
19 other way, which then triggered this request?

20 A. That is correct.

21 Q. To you?

22 A. That is correct. They had -- they had
23 customer questionnaires, they just didn't have the
24 dispense data.

25 Q. And then in double asterisks and bigger font

1 it says: "We hope to collect dispensing data from
2 these customers before July 15th in order to avoid
3 disruption to control eligibility."

4 A. Uh-huh.

5 Q. So do you know whether these pharmacies in
6 this buying group had indeed been receiving
7 controlled substances without the dispensing data on
8 file?

9 A. How many of them were actually buying
10 controls, I cannot say. She did not include that
11 level of detail in the report.

12 Q. So it's fair to say, this is an example
13 where something slipped through the cracks, that the
14 requisite documentation of the history of how much
15 controlled substances that were used by these
16 various pharmacies in this pharmacy group was not in
17 the possession of Anda yet they were approved for
18 controls?

19 MS. KOSKI: Object to form. You can answer.

20 THE WITNESS: I can answer?

21 MS. KOSKI: Yeah.

22 A. It would appear that the data was missing.
23 They wanted our help in helping to collect it. What
24 the reasons were for that missing data, I can't -- I
25 can't speak to.

1 Q. But these were not new customers, this was
2 not a question of turning on a control?

3 A. That's right.

4 Q. This was a control that already was on?

5 A. Correct.

6 Q. Without the requisite documentation?

7 A. Correct.

8 MS. KOSKI: Object to form.

9 A. Correct, but the questionnaire was there but
10 not the dispensing data.

11 (Anda-Williams Exhibit 24 was marked for
12 identification.)

13 BY MS. RELKIN:

14 Q. Next document. I've marked as Exhibit 24 a
15 document stamped 708146.

16 MS. KOSKI: This seems to be a long one, if
17 you need a second.

18 A. Yeah, it's tied to the one -- the e-mail
19 before.

20 Q. Right.

21 MS. KOSKI: I just said it was a long
22 e-mail, if she needs to look at it, it's got a
23 lot of pages.

24 Q. Oh okay. That's why I presented it as the
25 next exhibit. So the prior e-mail was July 22nd.

1 Fast-forward a few weeks, about three weeks, and
2 we're on August 14th.

3 A. Correct.

4 Q. And go to the first part of -- first e-mail
5 in the chain starts on page 2, and it's an e-mail
6 from Latoya Samuels to Al Paonessa, he's the
7 president, right?

8 A. (Nodding head.)

9 Q. And a number of other individuals in
10 compliance and management and yourself; is that
11 right?

12 A. Correct.

13 Q. Regarding Epic and IPA New Jersey, required
14 information, do you see it indicates that: "The
15 attached report contains a list of active accounts
16 with the Epic and IPA NJ buying groups without a
17 questionnaire and/or dispensed data on file. Many
18 accounts within the group purchase a high volume of
19 controls. It is important for us to receive this
20 information to determine control eligibility as we
21 are required by the DEA to 'know our customers.'"

22 By the way, does that refresh your
23 recollection that the "knowing your customers" was a
24 DEA requirement?

25 MS. KOSKI: Object to form. You're asking

1 for a legal conclusion. She's not required to
2 answer questions about a legal conclusion.

3 Q. Does -- did --

4 MS. KOSKI: You can ask her if that's what
5 it says.

6 Q. Did your DEA compliance analyst, Latoya
7 Samuels, in the ordinary course of business in an
8 e-mail to you, indicate that it was required by the
9 DEA to know our customers?

10 A. Yes.

11 Q. And then Ms. Samuels indicates: "We have
12 been in communication with the NAMs for quite some
13 time, and they are well-informed regarding the
14 requirements and the current status. They've been
15 working diligently with corporate and our sales team
16 to communicate this information to the customers."

17 And then deadlines were set, right, July
18 31st for Epic?

19 A. (Nodding head.)

20 Q. And do you see she indicates: "We have made
21 numerous attempts to obtain this information over
22 the past year and to ensure we are in compliance
23 with guidelines set forth. It is imperative for us
24 to review the information."

25 And then next bullet point, she goes on to

1 say: "With regard to IPA New Jersey, this is a
2 larger group, and as a result, there are more
3 accounts impacted. While our goal still remains to
4 have the questionnaire and/or dispensed data
5 submitted for review, we will continue to work
6 collaboratively with Rachelle to finalize these
7 deadlines for these accounts to submit this
8 information based on sales volume, sporadic sales
9 trends, et cetera."

10 So with regard to Epic, it's more than a
11 year that this was an ongoing customer receiving
12 product, but the information required for compliance
13 was not yet available; is that right?

14 A. Can I just say something here? When these
15 accounts were first established and they were turned
16 on for controls, there was at that point some kind
17 of customer questionnaire that was completed.

18 Then that customer questionnaire was
19 revamped, enlarged upon, and I -- I remember that we
20 were asked to get the new questionnaire. Now,
21 that's what I recall our mission on this being, is
22 that they wanted the new -- the updated one to come
23 in, not whether --

24 Q. And the dispensing data, as well?

25 A. And the dispensing data, correct.

1 Q. The dispensing data tells how many other
2 opioids they have purchased and dispensed?

3 A. Correct.

4 Q. Not just from you, but from all the other
5 suppliers?

6 A. Correct. What documentation was in place
7 for these accounts prior to that on the compliance,
8 I have -- I have no knowledge of.

9 Q. But it -- they were nudging and nudging Epic
10 for a year?

11 A. That's the way it sounds, yes.

12 Q. But they didn't have it all yet?

13 MS. KOSKI: I'm not objecting to your
14 nudging --

15 A. I remember that. I remember they were after
16 Epic all the time, and they --

17 MS. KOSKI: Ah-ah, wait for a question.

18 THE WITNESS: Okay. Sorry.

19 Q. How many pharmacies did Epic encompass?

20 A. Oh, goodness. I don't know the exact
21 number, but it was several hundred.

22 Q. And --

23 A. And it could -- it could have even been
24 closer to 6, 700 maybe. It was a very, very large
25 group.

1 Q. And you may have told me this, but where
2 were the pharmacies?

3 A. Everywhere. There were -- an opportunity
4 for somebody to be an Epic member no matter where
5 the pharmacy was. There were some more
6 regionalized. Like, KPPA was the Keystone something
7 of Pennsylvania, Keystone -- Keystone Consortium of
8 Pennsylvania or something of that nature. IPA was
9 New Jersey, in and around New Jersey.

10 Q. Okay. And then Brian Witte writes --

11 MS. KOSKI: That is the same document?

12 MS. RELKIN: Yeah.

13 Q. -- later that day, 7:18, saying: "There is
14 another list being e-mailed around. I assume I have
15 not responded or are on that other file? Or is an
16 additional list of accounts we need data on?"

17 And then Robert Brown, director of
18 compliance, what does he state?

19 A. He stated: "The other list contains the
20 customers that we identified in June as not
21 submitting questionnaires and for whom we would give
22 until July 31st to provide that item. This list is
23 only Epic and IPA New Jersey with whom we have been
24 working for quite some time to obtain both
25 questionnaires and dispense data which we have not

1 received and for whom we gave until July 31st to
2 submit."

3 Q. So for some of these, it was both
4 questionnaires and dispense data that had not been
5 provided yet?

6 A. (Nodding head.)

7 Q. Is that right?

8 A. Correct.

9 Q. And some of them had not provided
10 questionnaires at all, or at least the new ones?

11 A. Correct.

12 Q. Then if you go to the next page, this is the
13 next day, July 30th, Brian Witte writes to Robert
14 Brown first thing in the morning, 8:55, and he
15 states: "Is there a complete list of all the
16 accounts getting shut off tomorrow?"

17 And are you on that? You are.

18 And then what do we have? We have Sabrina
19 Solis responding on August 2nd, a couple of days
20 later, and what does she state?

21 A. She said: "Please be advised the control
22 flag was flipped to 'N'" -- in quotes -- "for the
23 accounts attached. We do not have any
24 questionnaires that have been -- that have not been
25 notated in TPS at this point, so everything received

1 is now in the system. Please note that all Epic
2 accounts were given until August 14th to provide the
3 required data to us. Over 60 accounts provided a
4 questionnaire to us in the last couple of days, so
5 they were not affected."

6 Q. And when it's flipped to N, that means "no"?

7 A. No.

8 Q. So that means they can't get controls?

9 A. No controls.

10 Q. Because the system is shutting them down?

11 A. Correct.

12 Q. That's a shutdown, right?

13 A. They can still purchase other generics,
14 no -- just no controls.

15 Q. And then you respond on August 14th, so
16 that's almost two weeks later. And what do you
17 indicate?

18 A. I was sending an update to Brian, to
19 Dominic, and to Anita: "Just got off the phone with
20 Robert to get a quick update on where we stand on
21 the accounts being shut off from control purchasing.
22 The attached list of 223 accounts were the ones that
23 were turned off last week. Epic accounts are
24 scheduled to be cut off today. Robert will be going
25 through the accounts impacted with Ryan. IPA

1 accounts shut off will be done in waves starting
2 with the first group tomorrow, August the 15th. And
3 he is working directly with Rachelle. We are
4 starting to see some impact of these from last week.
5 There have been a few accounts that have commented
6 that they will stop ordering from us due to their
7 controls being shut off, but so far they have also
8 been unwilling to supply the required documents.
9 Robert has seen an influx of dispense data,
10 questionnaires coming in the last few days,
11 primarily from the Epic accounts. He mentioned that
12 some of them looked pretty bad, so more than likely
13 will not be opened up for controls."

14 Q. This was a notable situation, was it not?

15 A. (Nodding head.)

16 Q. Hundreds of pharmacies got shut down from
17 being able to get controls because of the either
18 lack of paperwork or the paperwork they did provide
19 which looked pretty bad; is that correct?

20 A. That is correct.

21 Q. What happened after that?

22 A. What happened after that, I recall was they
23 proceeded with shutting them down. And they would
24 give them due dates, and if they didn't meet the due
25 dates, the account flag was moved to "N." And no

1 controls were able to be purchased until these
2 documents were provided and reviewed by the
3 compliance team.

4 Q. Was there any contact with the overarcher --
5 overarching Epic and IPA buying group, whoever was
6 in charge of that?

7 A. That was done at the national account level.
8 That was not up to the sales group to do. I would
9 assume there were a lot of discussions that were
10 going on at that time.

11 Q. Did you come to learn whether you did, in
12 fact, lose a substantial generic business for
13 noncontrolled substances as a result of the cutoff?

14 A. We did. They were measuring those results
15 for some time. I remember seeing a few reports. I
16 can't remember the numbers. Some customers
17 eventually came back to us on the generic side.
18 Others we just lost.

19 Q. Do you know whether any of these 223
20 accounts that were shut off the week before August
21 14th, whether any of them were reported to the DEA?

22 A. I do not know.

23 Q. And do you know whether the Epic accounts
24 which were scheduled to be cut off on August 14th
25 were reported to the DEA?

1 A. I do not know.

2 Q. Do you know whether the DEA was ever
3 informed by anyone from Anda that the dispensing
4 data questionnaires for a number of them looked
5 pretty bad?

6 A. I do not know.

7 (Anda-Williams Exhibit 25 was marked for
8 identification.)

9 BY MS. RELKIN:

10 MS. RELKIN: You'll get -- yeah.

11 MS. KOSKI: This is a long one to read.

12 BY MS. RELKIN:

13 Q. I've marked as Exhibit 25 document number
14 607225, and it's a two-page document, goes to page
15 226.

16 We can start with the first of the chain
17 e-mail, which is from Sabrina Solis, 2/19/2013, to
18 you and a number of your colleagues. And the
19 subject is: "Customer questionnaire meeting,
20 follow-up info."

21 And do you see that Ms. Solace says:

22 "Attached you will find two reports as requested,
23 monthly controls sales dollar breakdown to identify

24 ██
25 manager/rep assigned to account and the deadlines

1 assigned to each account based on control purchasing
2 volume."

3 And then she mentions that: "Deadlines as
4 outlined in meeting." And there was a deadline of
5 July 15th for cutoff date for lower volume accounts
6 and July 31st cutoff for higher volume accounts.

7 Do you have any recollection of this
8 meeting?

9 A. Vaguely.

10 Q. Robert Brown on July 18th writes to you and
11 a number of your colleagues about this, and what do
12 you see that he indicates?

13 A. He indicates: "Per our discussion and
14 agreement on June 19th and the attached e-mail,
15 customers who have not provided a Customer
16 Questionnaire will not be permitted to continue to
17 purchase controls. Those customers who have a
18 history of lower purchase of those items were
19 removed from control eligibility earlier this week.
20 Those customers who have a higher volume of control
21 purchases will not be eligible to continue those
22 purchases after July 31st if a questionnaire is not
23 received. We want to be sure that all of the sales
24 representatives are notifying their customers of
25 this date so that we can obtain the necessary

1 information and not disrupt buying pattern. We have
2 heard from several sales representatives that they
3 were unaware of the July 15th cutoff date, and we
4 want to be sure that the customers have ample time
5 to provide the necessary information. As you know,
6 our customers have been asked to supply this data
7 for the past three years and have received multiple
8 reminders during that period."

9 Do you want me to continue reading?

10 Q. No. That's -- that's fine.

11 A. Okay.

12 Q. So with regard to the last sentence, "As you
13 know, our customers are been asked to supply this
14 data for the past three years and have received
15 multiple reminders during this period," you were
16 aware of that?

17 A. There were a number of initiatives to try to
18 get this information from the customers, yes.

19 Q. And initiatives included compliance
20 enlisting your department to work on it?

21 A. The national accounts -- I mean, it was a
22 companywide effort to get this data in.

23 Q. And why was it so hard -- do you have any
24 understanding why it was so hard to get this data
25 from the customers?

1 MS. KOSKI: Object to form.

2 Go ahead. I'll let you know. Otherwise,
3 it's just for the record.

4 A. We -- what we heard from our customers was
5 that Anda was being ultraconservative, that they
6 weren't being asked to provide this data to anyone
7 else, including their primary. So if the primary
8 wasn't being asked for it, why, as a secondary,
9 small distributor, was Anda taking the position of
10 requiring all this information for them to purchase
11 controls.

12 We heard this time and again. I heard it
13 personally with a number of call escalations that I
14 handled. So there was a reluctance on the part of
15 the pharmacy staff to provide this data to us.

16 Q. In the meantime, these pharmacies were
17 receiving controlled substances, correct?

18 A. Correct.

19 MS. KOSKI: Object to the form.

20 Q. Did they receive letters by certified mail
21 or Federal Express pressing the urgency of these
22 demands?

23 A. I remember that there were waves -- like we
24 talked about, waves of communications going out to
25 these customers. How they were sent, I can't speak

1 to, because that was done by the marketing
2 department in a mass mailing initiative on numerous
3 occasions.

4 Q. Were there discussions within your
5 department or between your department and compliance
6 or marketing that maybe these customers were suspect
7 because why aren't they giving us this basic data?

8 MS. KOSKI: Object to the form.

9 A. I don't recall that that particular
10 discussion happened, just that we were relaying to
11 compliance what we were hearing from our customers
12 as to the reason they weren't supplying them. They
13 weren't being required to do this anywhere else.
14 That's what they were telling us.

15 Robert informed us that that was not quite
16 the case, that after Anda started this protocol,
17 more and more of the smaller secondaries started
18 doing it, as well.

19 He had copies of questionnaires that he was
20 starting to start seeing from other smaller
21 distributors such as -- such as Anda. So we knew
22 that the ball was catching fire, that it was
23 starting to become a regular thing. I believe in my
24 heart of hearts that Anda was one of the first to do
25 it, if not the first, to start that process.

1 Q. And how did -- how did Robert Brown know
2 about other secondary distributors starting to adopt
3 these questionnaires, as well?

4 A. Because he was in --

5 MS. KOSKI: Object to form.

6 THE WITNESS: Oh, sorry.

7 MS. KOSKI: Go ahead.

8 A. He mentioned to me on maybe twice, two other
9 occasions, that he sat in on meetings with other
10 groups. There were conference calls that were held
11 for -- I -- I believe they were connected by the DEA
12 that would help to educate the distributors on
13 protocols and what was happening in the industry.
14 And they were taking that information and all
15 learning from it.

16 Q. And were there meetings without the DEA, but
17 just with distributors, discussing what was going on
18 in the industry and best practices?

19 A. There may have been. I don't know for sure.

20 Q. And do you know for sure that the meetings
21 that Robert Brown sat in on with these other
22 distributors and secondary distributors were --
23 involved the DEA?

24 A. I --

25 MS. KOSKI: Object to form.

1 A. I can't say for sure. The way he positioned
2 it with me was that there -- that he was privy to
3 information that was happening across the industry.

4 Q. Do you know how many customers at this point
5 fell into this category of missing the
6 questionnaires and dispensing data?

7 A. The exact number, I can't recall. I
8 remember that we were seeing new numbers every week
9 as things were changing. It was a very fluid
10 number. So there were ones that were turned off,
11 and then they would create and bring their dispense
12 data in. They would get turned back on if they were
13 deemed to be approved by compliance. So it was an
14 ever-changing number.

15 Q. The number was in the hundreds, though; is
16 that right?

17 A. I believe so.

18 (Anda-Williams Exhibit 26 was marked for
19 identification.)

20 BY MS. RELKIN:

21 Q. We've marked as Exhibit 26 a document number
22 109496. And this is an e-mail from Jay Spellman on
23 September 13th, 2010 -- we're going back in time a
24 little bit -- to a number of Anda individuals,
25 managers, including yourself. And the subject is:

1 "Control limit review for account number 477706."

2 And do you see that Don Moore -- who is Don
3 Moore, by the way?

4 A. He was one of my sales managers.

5 Q. Okay. He sends an e-mail to Patrick
6 Cochrane, Jay Spellman, and you, saying a customer
7 is being allowed to purchase 1,000 oxys, correct?

8 A. Correct.

9 Q. He indicated: "I have a question about
10 47706, Sunset Prescription Pharmacy. When the whole
11 CII issue started, he was cleared to buy CIIs, and
12 he bought CIIs all last month. Now, all the sudden

█ [REDACTED]
█ [REDACTED]
█ [REDACTED]
█ [REDACTED]
█ [REDACTED]
█ [REDACTED]
█ [REDACTED]
█ [REDACTED]

20 Do you recall this particular event?

21 A. Via this e-mail, yes.

22 Q. Okay. And --

23 A. Refreshed my memory.

24 Q. Jay Spellman says: "I see his DEA is valid
25 and schedules are loaded, including CIIs. I don't

1 think we should be increasing a new customer's oxy
2 limit at this time."

3 But do you see what this does mean is that
4 he was indeed approved and was receiving oxy and
5 just very quickly was looking for more, which was --
6 the more was denied?

7 MS. KOSKI: Object to form; mischaracterizes
8 the document.

9 You can answer.

10 A. I'm sorry. What's the question?

11 Q. That was probably poorly worded. It's
12 getting late.

13 We know that Jay Spellman denied his
14 request --

15 A. Correct.

16 Q. -- to increase it?

17 A. Correct.

18 Q. Okay.

19 MS. KOSKI: Object to the form.

20 Q. But you also see from this document that
21 this very new customer, who had only started in
22 July, was already buying -- cleared to buy CIIs, and
23 he bought CIIs in the month of August?

24 A. Uh-huh.

25 Q. Is that a "yes"?

1 A. Yes.

2 Q. And remember kind of the beginning of this
3 deposition, I believe you testified to the effect
4 that new customers would not get controlled
5 substances, CIIs, right away. Usually there was a
6 90-day waiting period. Is that right?

7 A. That was the general practice, yes.

8 Q. So -- but this particular example is not
9 consistent with that?

10 A. That is correct.

11 Q. Do you recall having any meetings to try to
12 ascertain why this -- this customer, Sunset
13 Prescription Pharmacy, got oxy so quickly?

14 MS. KOSKI: Object to form; mischaracterizes
15 the document.

16 A. I don't recall. There were a lot of
17 discussions going on with compliance, a lot of
18 information being shared, but I can't remember a
19 specific meeting about this specific customer.

20 Q. And it could well be that this was not an
21 aberration; that customers did get cleared and
22 started getting it?

23 A. It -- it's possible. Maybe there was
24 something that was produced at the time when the
25 account was opened. I don't know. Maybe there was

1 a list of products that they had submitted as a type
2 of a dispense data at that time. I don't know.
3 They -- the e-mail doesn't elaborate on that.

4 Q. You doing okay?

5 A. I'm doing just great.

6 (Anda-Williams Exhibit 27 was marked for
7 identification.)

8 BY MS. RELKIN:

9 Q. I'm showing you what we marked as
10 Exhibit 27. It's stamped 287484 through 485, and
11 the very top of the e-mail is from Jay Spellman to
12 Patrick Cochrane -- Cochrane, you, Michael Cochrane,
13 and Tim -- Kim Poropat. And the subject is:
14 "Johnson Family Pharmacy LLC."

15 MS. RELKIN: Okay. I need a different
16 document.

17 MS. LUND: The exhibit we have doesn't match
18 the Bates number you just read.

19 MS. RELKIN: Yeah, yeah, yeah, yeah. I
20 think I stamped -- what number do you have?

21 MS. KOSKI: 3889.

22 MS. RELKIN: Do you all have 3889?

23 MS. LUND: Uh-huh.

24 MS. RELKIN: Okay. And that's what -- what
25 I'm looking at doesn't -- that was just a goof.

1 Thank you.

2 For the record, what was marked 7484 is not
3 the exhibit. I apologize.

4 BY MS. RELKIN:

5 Q. Ms. Williams, you have the 3889?

6 A. Yes.

7 Q. Okay. Good. That's the right one.

8 A. Okay.

9 Q. Okay.

10 MS. KOSKI: So why don't you just redo that,
11 identify what Exhibit 27 is --

12 MS. RELKIN: Yes.

13 MS. KOSKI: -- on the record.

14 MS. RELKIN: It looks like if I just change
15 it to my marked -- does anybody have an extra
16 copy that doesn't have my markings on it?

17 MS. LUND: You can use mine.

18 MS. RELKIN: Thank you.

19 (Anda-Williams Exhibit 27 was marked for
20 identification.)

21 BY MS. RELKIN:

22 Q. So what we just marked as Exhibit 27 is, in
23 fact, the number 283889, and it's two pages, goes to
24 890. And if we go to the beginning of the e-mail
25 chain, it's an e-mail from RemedySupport to Barry

1 Koran regarding Chestnut Aid Pharmacy. And it says:
2 "Shipped to, over the limit, status closed," and
3 listed as importance, "high."

4 RemedySupport I assume is the computer
5 support from the Remedy Group? You tell me. Strike
6 it.

7 Who is RemedySupport?

8 A. RemedySupport was an automatic e-mail system
9 that would notify the sales rep of anything relative
10 to the account. If there was -- the CII group had
11 access to Remedy so that if there was a CSOS order
12 that was not able to be fulfilled for whatever
13 reason, through the automated system, they would
14 notify the sales rep. And they would copy them on
15 that, and that's what you see there, that here's the
16 resolution. I sent the order to the customer, but
17 only sent as much product as the limit would allow.

18 Q. Okay. So was the CII order -- order over
19 the limit?

20 A. Correct.

21 Q. And so does that mean that the customer got
22 some product, but only as much as the limit would
23 allow?

24 A. Correct.

25 Q. And then the status -- current status of the

1 opportunity is closed, does that mean that the
2 customer is shut down for future shipment?

3 A. No. What that meant was that the customer
4 had reached their limit for that month. And nothing
5 further was going to be sent out to them.

6 Q. Are you familiar with the term kill --
7 "fill/kill"?

8 A. Ung-ugh.

9 Q. Huh. Okay. We heard about that from Vicki
10 Mangus.

11 A. Fill/kill?

12 Q. Fill/kill.

13 A. Ung-ugh, no.

14 (Discussion off the record.)

15 A. That might be a term that's used more on the
16 chain side, like the big chains, Walgreens and so
17 forth.

18 MS. KOSKI: Don't guess.

19 A. Yeah. I don't know.

20 Q. Did you have an understanding that when an
21 order exceeded limits, that it is permissible to
22 provide as much as was allowed under the limits and
23 just not send the remainder, as opposed to not
24 filling the complete order?

25 A. I had seen this happen prior. I can't

1 remember the customer name, but I did hear this
2 happening before. So I assume that this was the
3 protocol that was followed on CIIs.

4 Q. But sitting here, do you know whether or not
5 that was the protocol, or the desired protocol, or
6 whether this was an aberration?

7 A. No. That -- they would send up to the limit
8 and then notify the sales rep accordingly.

9 Q. And would they -- would they also notify the
10 DEA?

11 A. I don't know what their protocol was. That
12 was done -- the -- these folks were in the
13 warehouse. They were not sitting on the sales
14 floor, and these were -- at this particular time,
15 most of the controls were being shipped out of the
16 Ohio warehouse, so these folks weren't even sitting
17 in -- anywhere near us.

18 Q. Okay. So let's look at the e-mail chain,
19 then, after -- now that we're done with the robot
20 e-mail --

21 A. Uh-huh.

22 Q. -- we have the human e-mail, and we have
23 Barry Koran writing to Vickie Shalley --

24 A. Uh-huh.

25 Q. -- on September 24th. And he indicates that

1 he: "Just got off the phone with Pat Burke, owner
2 of the above and two other Epic pharmacies. Furious
3 about the CSOS system not notifying him about items
4 not being shipped. Needed number 700398 right away.

■ [REDACTED]
■ [REDACTED]
■ [REDACTED] [REDACTED]
■ [REDACTED]
■ [REDACTED] [REDACTED]
■ [REDACTED]
■ [REDACTED]
■ [REDACTED]
■ [REDACTED] [REDACTED]

14 him was being monitored by QA so company hears for
15 themselves. I am trying to write this e-mail as
16 accurately as possible. Please advise."

17 He signs "Lt. Barry Koran." Was he a
18 lieutenant once?

19 A. It was a nickname he gave himself.

20 Q. Lieutenant?

21 A. Lieutenant. Lieutenant Koran.

22 MS. KOSKI: Objection. You can't give
23 yourself a nickname. That's just not how it
24 works.

25 Q. He had not actually served?

1 A. No, not to my knowledge.

2 Q. Why did he give himself that nickname? Is
3 he -- what did he think he was?

4 A. He thought he was all that.

5 Q. Why didn't he go for general?

6 A. It was kind of done in a -- in a fun way.

7 Q. Then Vickie forwards this e-mail up the
8 chain to you --

9 A. Uh-huh.

10 Q. -- and to Patrick Cochrane, Jay Spellman,
11 and Michael Cochrane. And then Vickie writes to Jay
12 Spellman, Patrick Cochrane, and Michael Cochrane:

■ [REDACTED]

■ [REDACTED]

■ [REDACTED]

■ [REDACTED]

■ [REDACTED]

■ [REDACTED]

■ [REDACTED]

■ [REDACTED]

■ [REDACTED]

■ [REDACTED]

■ [REDACTED]

■ [REDACTED]

■ [REDACTED]

1 that correct?

2 MS. KOSKI: Object to form.

3 A. Based on this e-mail, yes.

4 Q. Was that the protocol to have questionnaires
5 and dispensing data before increasing limits?

6 MS. KOSKI: Object to form.

7 A. I don't know what his authority limit was.
8 Again, this appears to be the -- 2010. I'm just
9 trying to think. We were moving in that direction
10 and getting all of that information, the dispense
11 data and the questionnaires on limit requests, so
12 this was a variance to that.

13 Q. Do you recall any discussions about this
14 event?

15 A. I do not.

16 Q. This was Epic, and we know that Epic had
17 their accounts shut down later from the documents.

18 A. From the group, right.

19 MS. KOSKI: Object to form.

20 Q. Sitting here, do you know whether these
21 specific Epic pharmacies were part of that shutdown?

22 MS. KOSKI: I'm sorry. Are you talking
23 about the document we were just looking at?

24 MS. RELKIN: The document we were looking at
25 refers to Chestnut Aid Pharmacy and two other

1 Epic pharmacies.

2 MS. KOSKI: Got it. My bad. I couldn't
3 tell if you were looking at something else.

4 MS. RELKIN: Sure.

5 (Anda-Williams Exhibit 28 was marked for
6 identification.)

7 BY MS. RELKIN:

8 Q. Marked as Exhibit 28, a document stamped
9 90024 through 25. And the first page of the e-mail
10 is from Sabrina -- on the bottom, from Sabrina Solis
11 to you and Christine Leon-Laurent, copied to other
12 managers. Who is Christine Leon-Laurent?

13 A. She was in national accounts. She was the
14 operations manager.

15 Q. Is that probably the Christine who Vicki
16 Mangus was mentioning?

17 A. She's now Christine Johnson.

18 Q. But it's all one and the same Christine.
19 And the subject matter is: "Customers not actively
20 purchasing controls, July 12 through January 13."

21 And do you see she indicates: "Please
22 review the list of accounts attached that are not
23 actively purchasing controls. We would appreciate
24 if you can approve this list by Thursday 2/14 so we
25 can proceed with removing controls. Notate any

1 accounts where you would prefer controls to remain.

2 "Please note that some of these accounts

3 have been reviewed previously and left alone.

4 However, several of these accounts have not

5 purchased controls in a year or even two. Remember,

6 if and when -- if when a customer needs controls

7 again, we can review as a new customer with the

8 required information. Thanks."

9 Do you remember this -- this happening?

10 A. Uh-huh.

11 Q. And do you understand the rationale for why

12 they wanted to shut down controls that had not --

13 customers who had not been actively purchasing the

14 controlled substances?

15 A. There was just no need. They weren't -- the

16 customers were not buying them. Why keep the flag

17 turned to "yes" when the customer had demonstrated

18 that there was no purchasing need on their part? So

19 they moved them to "no," and we can always revisit

20 the issue if the request came up.

21 Q. And then you responded, saying: "I gave the

22 sales managers until today to respond back on any of

23 these customers that there could potentially be an

24 issue. I confirmed there were no concerns with any

25 of these accounts being turned off from the sales

1 manager here in Weston."

2 So this correspondence indicates that
3 compliance was checking with sales, if it was okay
4 with sales for the compliance unit to shut down
5 controls on customers, correct?

6 A. What they were --

7 MS. KOSKI: Object to form.

8 THE WITNESS: Sorry.

9 A. What they were asking us to do was, before
10 they shut them off, were we aware of any situations
11 that maybe we were in the process of getting
12 dispense data in, were there any that were currently
13 being looked at, so that we didn't go through double
14 working, turn it off and then turn it back on. And
15 we really didn't have any of those situations. So I
16 gave the blessing to go ahead and shut them off.

17 We weren't losing anything. We weren't
18 losing sales from it. There was no loss to the
19 company, other than just removing any potential
20 liability. And we still had the possibility of
21 turning it back on in the future if they provided
22 what they needed.

23 (Anda-Williams Exhibit 29 was marked for
24 identification.)

25 THE WITNESS: Boy, we kill the trees, huh?

1 MS. KOSKI: It's double-sided.

2 MS. RELKIN: This one is a single, but we
3 did mostly double.

4 We've marked as Exhibit 27 document 711564,
5 and this is a series of e-mails.

6 MS. ROBINSON: This should be 29.

7 MS. RELKIN: What did I say?

8 MS. ROBINSON: 27.

9 MS. RELKIN: Thank you. 29. Long day. Bad
10 eyes.

11 MS. KOSKI: Long e-mail.

12 MS. RELKIN: Long e-mail.

13 BY MS. RELKIN:

14 Q. So the second page in this document -- the
15 third page starts from the very beginning, the
16 bottom of the third page. It is an e-mail from
17 Sabrina Solis in compliance to Valerie Nemia, copied
18 to Michael Cochrane and Emily Schultz on December
19 6th, 2011. Subject matter is: "Need info."

20 Who is Valerie?

21 A. Valerie was one of the sales managers that
22 reported to me.

23 Q. And she said: Hi, Valerie. We removed
24 controls from the account below due to the fact that
25 no dispensing data was provided for review.

1 Thanks."

2 And then there's a number of different
3 pharmacies. Do you see that? Independents?

4 A. Uh-huh.

5 Q. All right? And you then -- you sent an
6 e-mail to Sabrina, Emily, and Cochrane, and what did
7 you indicate?

8 A. I asked for their help. I asked them to
9 copy me on communications such as this. Do you want
10 me to read this verbatim? Okay.

11 Q. That's fine. Sure.

12 A. Sales managers had started receiving these,
13 and it was like they didn't know what was going on.
14 So they came to me, and I had not seen it either,
15 and I hadn't been copied on it, so I asked for their
16 help.

17 Q. That's -- that's --

18 A. I did ask the question that in the future,
19 could we consider giving these accounts a 24 to
20 48-hour window to get the dispensing data in before
21 they were shut off.

22 Q. And then did Sabrina --

23 A. And then Sabrina -- yeah. Sabrina responds
24 that she would be sure to copy me going forward.
25 She apologized, and then she provided some

1 background on it.

2 Q. Okay. And the background was: "Anda
3 received a list of accounts with questionable
4 oxycodone purchases. We notified the managers
5 related to these accounts to collect updated
6 dispensing data for our review. We indicated that
7 if information was not received, we would follow up
8 shortly. One month was given to collect this
9 information. And during this time, out of about 80
10 accounts, data was collected for only about 20. Our
11 suspicions were accurate based on the information we
12 reviewed.

13 "We cut off the remaining 60 or so accounts
14 after a month. Dispensing data is now being
15 provided for these accounts, and we are evaluating
16 their control status individually. Once again, our
17 concerns have been validated with the new dispensing
18 data provided this week."

19 That was gloomy news, was it not?

20 A. It was.

21 Q. That only 20 out of 80 responded and the
22 data that they did receive was not good, correct?

23 A. Correct.

24 Q. And that would mean that -- not good would
25 suggest that they had dispensing history that was

1 troublesome with regard to the opioids, right?

2 MS. KOSKI: Object to form.

3 A. Correct.

4 Q. Then you wrote an e-mail on the front page,
5 at 5:46 p.m., on December 9th, to Brian Witte, Anita
6 Isabella, and Dominic -- who is Anita Isabella?

7 A. Anita was the head of our sales reporting
8 team, and we relied on their team to give us a lot
9 of the data, number crunching, accounts, dollars.

10 Q. And you indicated that you: "Met with all
11 the sales managers this afternoon. And they did
12 receive a communication from Sabrina Solis on
13 November 1st requesting dispense data for the list
14 of accounts that were under review. The e-mail did
15 not say they would be turned off, but the tone of
16 the e-mail was such that each of them knew that if
17 it was not received, there was a likelihood that
18 they would be."

19 So this was an issue of concern -- explain.

20 A. This was just an issue that I didn't -- I
21 wasn't copied on those e-mails.

22 Q. Right.

23 A. So I didn't know what was going on.

24 Q. Right.

25 A. And then we're getting the notification

1 they're being turned off and I was, like, where did
2 this stem from, only to find out that the managers
3 had received these.

4 But as you will see, I think there was a
5 discussion that there was a launch or something and
6 that there was -- I could be wrong. I know Brian
7 asked us to find out why they didn't know a month
8 ago. And then I -- so I did my due diligence. I
9 met with them. I found out they were advised, but
10 some had not done their due diligence.

11 Q. Got it. Then the second paragraph, you
12 indicated -- why don't you read into the record the
13 second paragraph.

14 A. "From that initial e-mail, each of them went
15 back to their sales reps to inform them that we
16 needed to get updated dispense data. Some customers
17 were unwilling to provide the data, and in other
18 cases, reps requested the data, but never received
19 it from the customer, and some did. But the
20 decision was still made validating the need for them
21 to be turned off. Given that this was in the hype
22 of the Zyprexa launch, I believe that the sales
23 managers may not have done as much follow-up as they
24 should have. They now know that when they receive
25 information such as this in the future from

1 compliance, they need to stay on top of the reps or
2 better yet, make the calls themselves directly.
3 Given I'll be copied on these in the future, I'll
4 make this a priority with the entire team to ensure
5 calls are made to the customers and follow-up is
6 done regardless of any other sales initiatives we
7 are involved in."

8 Q. So when you provided the reason for not
9 getting the data from these customers who were not
10 being compliant, you didn't -- you didn't discuss
11 what you mentioned today about this was because Anda
12 was being overly cautious? That wasn't a reason you
13 gave here?

14 MS. KOSKI: Object to form.

15 Q. Is that right?

16 MS. KOSKI: Mischaracterizes prior
17 testimony.

18 A. What we were discussing in this particular
19 situation was why they didn't act on the information
20 that they were sent. That was the issue at hand for
21 me. You were sent information from compliance. You
22 were told to do a certain thing. It appears from
23 our results so far, that you didn't do what you were
24 asked to do. And going forward, you need to do a
25 better job at that.

1 Q. Now, these -- some of these customers, when
2 they didn't get the questionnaires and dispensing
3 data in, they did get extensions?

4 A. Some of them did, yes. If they indicated to
5 us, "I'm sorry, I haven't gotten to it, I was on
6 vacation," this, whatever, if the reason seemed
7 plausible, we would ask for a two or three-day
8 extension. But after that, if it wasn't in our
9 hands --

10 Q. Some of the extensions were longer than two
11 or three days, weren't they?

12 A. I'm sure there may have been some that may
13 have been a week, if somebody was on vacation for a
14 week. That could have happened.

15 Q. Some were 30 days?

16 A. Rarely.

17 Q. And when they got the extension, it wasn't
18 just a matter of not cutting off their controls, but
19 they were still receiving product; is that right?

20 A. During the time that we were getting that
21 data in, correct.

22 MS. KOSKI: Are you still doing okay?

23 THE WITNESS: Uh-huh. Is everybody else?

24 MS. KOSKI: You have more energy than me.

25 THE WITNESS: And I didn't even have coffee

1 today.

2 MS. KOSKI: I need more.

3 Q. With regard to Exhibit 29, the controls that
4 were shut off for those customers, sitting here, you
5 don't know whether compliance reported this to the
6 DEA, do you?

7 A. I do not know.

8 Q. And again, you don't know whether or not
9 they were required to?

10 A. I do not know.

11 Q. This is just backing up a few days from that
12 week in December in 2011.

13 (Anda-Williams Exhibit 30 was marked for
14 identification.)

15 BY MS. RELKIN:

16 Q. This is Number 30, and the stamp number is
17 70549 through 50. And I probably should have shown
18 you this e-mail first, since it's a week earlier.
19 And this is a series of e-mails from you.

20 You wrote an e-mail to Michael Cochrane,
21 Emily Schultz, and Sabrina Solis on December 5th,
22 2011, regarding: "Drug Store Pharmacy, Inc., number
23 802433." And you were talking about one of your --
24 is Jana Porter one of your sales reps?

25 A. She was.

1 Q. And she went to key in an order for the drug
2 alprazolam. That's a controlled substance, right?

3 A. It's a CIV.

4 Q. Does that still fit within the rubric of
5 controlled?

6 A. It does. It just doesn't require the C22
7 form.

8 Q. Right. Anyway, and she noticed that the
9 control flag was set to "N."

10 A. Uh-huh.

11 Q. And you were complaining that you had not
12 received any communication about this shutdown,
13 right?

14 A. Right.

15 MS. KOSKI: Object to form.

16 Q. And Jana was saying that they had been a
17 well-respected customer for years and have even
18 given discounts to many of our Ohio warehouse
19 employees that come there for prescriptions. Can
20 someone look into this for us?"

21 And then you -- that was 11:01 a.m. And at
22 5:48 p.m. you wrote an e-mail to Howard Davis. Who
23 is Howard Davis?

24 A. I'm trying to remember. It doesn't even
25 ring a bell to me. I know a lot of people in our

1 company. Who was Howard?

2 Q. I guess he was short-lived there.

3 And what did you say to Howard?

4 MS. KOSKI: I'm going to object to the
5 extent the first part was not included in the
6 question. I assume you didn't mean to. "I guess
7 he was short-lived there."

8 MS. RELKIN: Oh, yeah. Okay.

9 MS. KOSKI: Strike that?

10 MS. RELKIN: Strike that.

11 A. I don't recall. I --

12 Q. Just -- did you write -- based on this
13 document, did you write to Mr. Howard Davis saying:
14 "Can we find out why this account was suddenly
15 turned off from buying controls? Attached is my
16 e-mail from this morning. We have not gotten a
17 response yet, and the customer needed to place an
18 order today. We had no knowledge of why the control
19 flag was suddenly changed."

20 And this was referring to a drugstore in
21 Columbus, Ohio?

22 A. Correct. He -- I believe he was a member
23 of the -- of the compliance team.

24 Q. Okay.

25 A. But I do believe it was for a fairly short

1 period of time.

2 Q. And then what did he say to you?

3 A. He said: "The Drug Store Pharmacy in
4 Columbus Ohio had a suspicious ordering pattern that
5 would have been difficult to defend if the DEA came
6 in and asked about it. The account was turned off
7 from controlled substances on 12/5/11. I regret any
8 confusion that you were not notified
9 contemporaneously of this action. Howard."

10 Q. So that was the same issue that brewed the
11 following week about not being notified?

12 A. Correct. And I believe they were right
13 around the same time frame.

14 Q. Yes.

15 A. Yeah. Okay.

16 (Anda-Williams Exhibit 31 was marked for
17 identification.)

18 MS. RELKIN: We're getting there.

19 MS. KOSKI: Getting there like a 7:40 flight
20 getting there or -- just wondering.

21 MS. RELKIN: I will do my best.

22 MS. KOSKI: Okay.

23 MS. RELKIN: Mine is, like, 8:00 or 7:59.

24 MS. KOSKI: Yeah.

25 MS. RELKIN: So we're in the same boat.

1 MS. KOSKI: All right. I'm here. I can go
2 later, but you have your time.

3 BY MS. RELKIN:

4 Q. Okay. So what we've marked as Exhibit 31,
5 stamped 107989, is an e-mail from Patrick Cochrane
6 to you regarding a customer number 404255. Strike
7 the -- yeah. So that's the top of the e-mail, but
8 the bottom of the e-mail --

9 A. Uh-huh.

10 Q. -- that's from you to him.

11 A. Correct.

12 Q. What did you say?

13 A. I said: This customer is waiting for an
14 order placed on 8/10. I think I know the reason for
15 the delay, but DEA has not been deactivated at this
16 point. Is this account under review? Oxy order and
17 the history didn't look good to me."

18 Q. And then what did Patrick Cochrane say?

19 A. Patrick's response was: "I'll look. Not

█ [REDACTED] █
█ [REDACTED] [REDACTED]
█ █ [REDACTED]
█ █ [REDACTED] [REDACTED]
█ [REDACTED]
█ █ [REDACTED]

■ [REDACTED]

■ [REDACTED] [REDACTED]

■ [REDACTED] [REDACTED]

■ [REDACTED]

■ [REDACTED]

■ [REDACTED]

■ [REDACTED]

8 Q. Do you know what happened with that order?

9 A. I do not. I don't recall.

10 Q. And here, you were -- you were weighing in
11 to regulatory as kind of the eyes and ears of sales?

12 A. I was bubbling up. Yeah. I was bubbling up
13 what -- something that didn't look right to me.

14 Q. Okay.

15 A. And typically, that's sometimes how that
16 happened, where I -- you know, a sales rep would
17 come to me and say, you know, "Can you help me find
18 out what's going on with this order?" And then you
19 look at it and then -- hmm, interesting.

20 Q. So that was August 13th, 2010.

21 (Anda-Williams Exhibit 32 was marked for
22 identification.)

23 BY MS. RELKIN:

24 Q. I'm showing you a document that's from the
25 next month, so what we've marked as Exhibit 32 is

1 stamped 109372, going to -- it's a three-page
2 document.

3 We'll go to the first -- beginning of the
4 e-mail on the third page, which is Page 9374. And
5 do you see that Joe Falzone, manager of inside
6 sales -- I take it back.

7 Donna Rochin, who was she?

8 A. She was one of the sales representatives out
9 on the West Coast in our Corona office.

10 Q. So she didn't report to you?

11 A. No.

12 Q. She wrote on September 23rd, 2010 to Joseph
13 Falzone, and he was also in the California office?

14 A. Joseph Falzone was a sales manager in
15 California. We had about five or six sales reps out
16 there, and he reported to Dominic Floro in New York.

17 Q. And the subject was: "Limit increase
18 account number 51180."

■ [REDACTED] [REDACTED]
■ [REDACTED]
■ [REDACTED] [REDACTED]
■ [REDACTED]
■ [REDACTED] [REDACTED]
■ [REDACTED]

25 A. We found that to be the case a lot of times.

1 Q. What does that mean?

2 A. Let's go back to the fact that most of our
3 pharmacies had a primary pharmacy that they worked
4 with. The primary pharmacy, many, many, many times,
5 would come in and actually give that pharmacy a
6 computer and set up their system on the computer for
7 them, so all they have to do is go in and start
8 placing the orders.

9 But there were reporting capabilities that
10 were available in that system, but many of them
11 never learned how to utilize it or access it. So
12 they would have to go back to their primary, get the
13 instructions on how to run the dispense data. And
14 some of them were very reluctant and old school.

15 Q. So then Joseph Falzone writes on September
16 23rd to Jay Spellman and copies Donna Rochin and

■ [REDACTED]
■ [REDACTED]
■ [REDACTED]
■ [REDACTED]
■ [REDACTED]
■ [REDACTED]
■ [REDACTED]
■ [REDACTED]

24 Do you see that?

25 A. Those were -- yeah. I'm assuming those are

1 his overall generic purchases or total purchases
2 from us.

3 Q. You don't think that's just talking about
4 controlled substances?

5 A. Oh, no, no. I know Joe, and that's the way
6 he used to write.

■ ■ [REDACTED]

■ [REDACTED]

■ [REDACTED]

■ ■ [REDACTED] ■

■ [REDACTED] [REDACTED]

■ [REDACTED]

13 Q. For the hydrocodone?

14 A. For the hydrocodone.

15 Q. And then Jay Spellman says: "If he didn't
16 know how to account for where his controlled
17 substances are being dispensed to, should we be
18 selling at all, much less requesting an increase?"
19 Right?

20 And what does Falzone say to Jay Spellman?

21 A. "Spoke to Rafi. Customer submits a report
22 directly to DEA on all controls on a weekly basis.
23 He does not run the report. His software vendor
24 manages it for him. 'I hit a button.' I'm

■ [REDACTED]

■ [REDACTED]

■ [REDACTED]

■ [REDACTED]

4 Q. And then Jay Spellman says?

5 A. "Increase denied."

6 Q. And then Joe Falzone says?

7 A. Joe's response back to Jay was: "I
8 understand. May I ask what your decision was based
9 on? I need information to salvage 150,000 a year of
10 business. When I talk to Rafi, he will ask the
11 business decision behind this."

12 Q. And then Jay Spellman says? Can you read
13 that into the record?

■ [REDACTED]

■ [REDACTED]

■ [REDACTED]

■ [REDACTED]

■ [REDACTED]

■ [REDACTED]

■ [REDACTED]

21 business decision to grant the increase, so when I
22 sit across from the DEA, I can explain it properly."

23 Q. A little warranted sarcasm there?

24 MS. KOSKI: Object to form.

25 A. That's how Jay was.

1 Q. And then you said: "I forwarded this on to
2 Dominic since Joe reports to him."

3 Do you remember this event?

4 A. I remember this, yeah.

5 Q. Did Joe Falzone get -- other than the -- the
6 response from Jay Spellman, which you just read, did
7 Joe Falzone get disciplined in any way for his
8 aggressiveness seeking to get this level increased?

9 A. I will let you speak with Dominic Floro
10 about that.

11 Q. I'm not sure whether we're taking Dominic
12 Floro's deposition.

13 A. Okay.

14 Q. So can you please let me know?

15 A. I know that there were numerous issues with
16 Joe Falzone that led to some documentation.

17 Q. Was he terminated from the company?

18 A. I do not recall if he -- yeah, I'm sorry, I
19 believe he was. Now that I'm thinking about it, I
20 believe he was.

21 Q. And that was about when?

22 A. I want to say maybe 2000 -- late 2007.

23 Q. '07 -- no.

24 A. I'm sorry. Where are we?

25 Q. 2010.

1 A. Oh, 2010. I left in 2015, and Joe had been
2 gone about a year, so I'm going to say about 2009.

3 Q. And what were the other issues besides this
4 event? Were they similar?

5 A. There were numerous issues with Joe. There
6 -- he is -- the overall management effectiveness.

7 Q. Did any of it have to do with CII products?

8 A. I don't recall that it was specifically
9 about CII. It was just a number and a variety of
10 issues --

11 Q. Management is --

12 A. -- that approved.

13 Q. Management is a kind of general issue, so
14 can you give me more specifics?

15 A. No, I really can't, because Dominic only
16 shared that there were issues and that he was being
17 put on a corrective action plan.

18 Q. And do you know if there were any issues
19 with Paul Ravinoff?

20 A. Can you elaborate on what kind of issues?

21 Q. Regarding controlled substances.

22 A. Regarding controls? I can't recall. I
23 can't recall of anything where there was
24 documentation on him specifically regarding
25 controls.

1 Q. Is he still with the company?

2 A. I do not know.

3 Q. Was he there when you left?

4 A. He was there when I left, yes.

5 Q. What about Wayne Tischler, any issues of
6 concern that you were aware of?

7 A. No.

8 Q. Is he still with the company?

9 A. No, he is not. He was laid off.

10 Q. When was he laid off?

11 A. I believe he was laid off about a year after
12 I was laid off. I was laid off in 2015, so it would
13 have been around 2016.

14 Q. What percentage of the force was laid off
15 during that time period?

16 MS. KOSKI: Object to form.

17 A. I don't know the percentage. I just know
18 that most of the sales managers that used to report
19 to me are no longer there.

20 Q. And a number of them were that -- was
21 that -- you were in '15. The '16, that was the wave
22 when Teva acquired?

23 A. There was -- my understanding was that there
24 was a wave in June, and then there was a wave in
25 July, and then there was a wave, I believe, in

1 August or September.

2 Q. And that was under the Teva control at that
3 point?

4 MS. KOSKI: Object to form.

5 A. I do not recall if Teva officially owned us
6 at that point, but I believe it was in anticipation
7 of them taking us over.

8 Q. Did you come to learn that, you know, Teva
9 management came to the facility in Florida and, you
10 know, made management decisions as to staffing
11 and --

12 A. No, I was not aware of that.

13 Q. Okay. By the way, on this --

14 MS. KOSKI: I don't know how much longer you
15 have, but maybe a break if it's going to be a
16 long time. I'm not pressuring you to make a --

17 MS. RELKIN: No, I'm not -- I'm not wrapping
18 up in 10 minutes, so if you need a break --

19 MS. KOSKI: Yeah. Maybe let's take a
20 stretch break.

21 MS. RELKIN: Okay.

22 MS. KOSKI: We've been going for two hours.

23 THE VIDEOGRAPHER: Off the record at 4:05.

24 (Recess from 4:05 p.m. until 4:18 p.m.)

25 THE VIDEOGRAPHER: Now back on the video

1 record at 4:18.

2 BY MS. RELKIN:

3 Q. Just going back to Exhibit 32, very briefly,
4 when Jay Spellman indicated, "I am trying to salvage
5 a 950 million dollar a year company, ours." What
6 was he referring to?

7 MS. KOSKI: Object to form.

8 A. Would you like my interpretation of what
9 this e-mail means?

10 Q. Yes.

11 A. My interpretation of it is that he's there
12 to make sure that as a company we continue to
13 prosper, and that we don't have anything that would
14 cause a reason for the DEA to come and shut us down,
15 like they had come and shut other distributors down
16 over a period of time.

17 Q. But when he used the word "salvage," doesn't
18 that note that there was already ongoing risks?

19 A. That, I can't speak to.

20 Q. So you are not aware of any particular event
21 in that time period --

22 A. No.

23 Q. -- where the company was on shaky ground?

24 A. No.

25 (Anda-Williams Exhibit 33 was marked for

1 identification.)

2 BY MS. RELKIN:

3 Q. We've marked as Exhibit 33 a document
4 stamped 70803. And this is e-mails between you and
5 some of your colleagues in September of 2011.

6 Do you see that the subject was: "To be
7 pulled from Remedy"?

8 A. Uh-huh.

9 Q. You indicated: "We have just reviewed an
10 article about TPS number 205120, currently in react
11 status on the Anda side. An employee of the
12 pharmacy has just been charged with selling
13 prescription painkillers as a side business, 700,000
14 pills, with a street value of over \$7 million.

15 "As we understand from the owner of the
16 pharmacy, this employee was terminated as of this
17 past Friday. However, I'm not sure what
18 implications are in store for the pharmacy itself,
19 given that it's likely some of these were coming
20 from within the store.

21 "We're not currently selling this pharmacy
22 and probably shouldn't be, given this situation.

23 "If everyone agrees, I say we deactivate
24 this react of the Anda side, search for any cold
25 call or react on the VIP side and shut them down."

1 Do you recall this?

2 A. I remember this, right. We -- we read about
3 this in the paper.

4 Q. It was just a local newspaper or a trade
5 paper?

6 A. I believe -- no, I believe it was in the
7 newspaper.

8 Q. And then you went and looked them up in your
9 system?

10 A. We saw that we were not selling to them, but
11 a react was a customer who had purchased from us at
12 one point and then stopped.

13 Q. But they were still open in your system?

14 A. They were still available as a lead in our
15 system.

16 Q. And when you say, "As I understand from the
17 owner of the pharmacy," did you call the owner of
18 the pharmacy?

19 A. I'm trying to remember. I believe I did. I
20 believe I did.

21 Q. And what do you recall hearing from him,
22 other than what you --

23 A. Whatever I put here.

24 Q. And then you indicated next e-mail: "Name
25 on the react is Pharmore Drugs in Skokie, Illinois."

1 Right?

2 A. Uh-huh.

3 Q. And then Amelia asked you: "This account is
4 already opened in TPS. Should we just close it out?
5 It is assigned to Mark Harmon."

6 And you said: Yes, I'm aware, but they've
7 never bought from us. We're pulling the DEA, and
8 the account/react should be shut down."

9 But then Mireya Bosch -- and who was she?

10 A. She was in our database management group.

11 Q. She responded: "We have two cold calls in
12 our database associated with this customer, Anda
13 cold call number, Pharmore Pharmacy, and VIP cold
14 call, Pharmore Pharmacy. Both leads are currently
15 coded as 995/777, out of business."

16 So anyway, you closed them down; is that
17 right?

18 A. That was my recommendation, yes.

19 Q. Okay. Did this happen with some frequency,
20 that you'd read about a problem with a pharmacy
21 inappropriately selling opioids, and you went and
22 checked your database to make sure that you weren't
23 involved with them?

24 A. If we saw something like that or it was
25 brought to our attention, we did that. That was

1 normally part of the protocol. If the account was
2 opened, who had the account.

3 (Anda-Williams Exhibit 34 was marked for
4 identification.)

5 BY MS. RELKIN:

6 Q. I'm showing you Exhibit 34, marked 134040,
7 and these are e-mails between you and colleagues on
8 February 9th of 2011 with a work log from February
9 8th, 2011.

10 So going to -- going to the work log on the
11 second page here, can you explain what the work log
12 is?

13 A. The work log goes back to the opportunity in
14 Remedy, when a control increase was being requested,
15 they would put a request through, like a work order,
16 to request that the -- what the family was that they
17 were looking for an increase on and any particulars
18 about that. Sometimes I was copied on those;
19 sometimes I was not.

20 The sales managers generally got involved
21 with reviewing these before they went to compliance
22 to ensure that the required dispense data was there.
23 And occasionally, I would interject a comment.

24 Q. Before seeing this today, is this something
25 you were familiar with, you know, in terms of, like,

1 reviewing it recently?

2 A. It did -- this recently? No.

3 Q. Okay. But you recall this event?

4 A. Vaguely.

5 Q. Okay. So do you see that a request was made
6 for an increase in the order; is that right?

7 A. A request was made for a control limit
8 increase, correct.

9 Q. Who wrote: "Please note, an increase cannot
10 be processed without a current customer
11 questionnaire on file with compliance"?

12 Is that the computer that spits that out?

13 A. Let me refresh my memory on how that worked.
14 I'm really trying to recall how that worked. I
15 thought that the comment was put in there by someone
16 from the compliance team, but I don't see a name
17 like we've seen in the past, so -- because normally,
18 when it comes from someone specifically, it says,
19 like right here: "Michael Cochrane has been
20 notified via e-mail."

21 Q. All right. Well, let's just get to your
22 comment. On February -- February 8th is when the
23 original work log --

24 A. Was started.

25 Q. -- was started, right. Thank you. And then

1 on February 9th, you -- it says: "Patricia Williams
2 has approved an approval request with the following
3 comments: Paul, be leery when they say [REDACTED]

4 [REDACTED] [REDACTED]

5 [REDACTED]

6 [REDACTED]I'll put this through,
7 but just some general information for you to know."

8 Do you recall that?

9 A. Yes.

10 Q. And do you recall debating whether or not to
11 put it through?

12 A. What I was putting it through was not to
13 approve it. I was putting it through to be approved
14 to be reviewed by compliance. I was the middle
15 person in the middle.

16 Q. And the increase, the controlled increase,
17 was for oxycodone, 1,000 of them; is that right?

18 A. Correct.

19 Q. To Cox Pharmacy?

20 A. Correct.

21 Q. And then Paul Ravinoff said: "They have a
22 222 form on file, and we did not ship them the oxy
23 because the opportunity was not complete. Is it
24 possible to fill that order now."

25 And then Emily Schultz asked: "Which

1 warehouse is the form at"?

2 Do you know what happened?

3 A. I don't.

4 Q. But it's your testimony that even though
5 this says "approved," that that didn't affect
6 anything until compliance --

7 A. Correct.

8 Q. -- reapproved it?

9 MS. KOSKI: Object to form.

10 A. The process was that every -- every control
11 request of this nature had to go either through a
12 sales manager or through me, and if a reason -- his
13 sales manager was out, he may have come to me and
14 said, "Can you review this and get this over to
15 compliance?"

16 Q. Why, when you were leery and you were
17 cautioning Paul Ravinoff to be leery about the --
18 what looked to be an excuse about the wholesaler
19 being out of stock, that you nevertheless approved
20 it?

21 A. I --

22 MS. KOSKI: Object to form. Go ahead.

23 A. I approved the opportunity to go to
24 compliance to be reviewed, but I was trying to share
25 information with him for further knowledge that just

1 because the customer says "I need a limit" or "I'm
2 at my max," it could mean something else. I was
3 trying to broaden his understanding of what that
4 customer may actually be meaning.

5 Q. And the comment that you made here about
6 being leery and you're not buying the justification,
7 was that something that would be available to
8 compliance to read?

9 A. Yes.

10 MS. KOSKI: Object to form. Sorry. I
11 wasn't fast enough.

12 (Anda-Williams Exhibit 35 was marked for
13 identification.)

14 BY MS. RELKIN:

15 Q. We've just marked as Exhibit 35 document
16 number 107933, and it's a series of e-mails from
17 August 26th of 2010. And it starts with Rebecca --
18 Roberta Weiniger sending an e-mail to Vickie
19 Shalley. And Robert Weiniger is who?

20 A. Roberta Weiniger was a sales rep on Vickie
21 Shalley's team.

22 Q. It indicates that a pharmacy with a certain
23 code number: "Just called and would like to know
24 how does he get his oxycod increased. He has a
25 nursing home and old people."

1 And then Vickie Shalley responds: "First of
2 all" -- and she -- Vickie Shalley forwards it with
3 an e-mail to you copied and then Patrick Cochrane
4 and Jay Spellman, and Kim Poropat -- saying: "First
5 of all, has the oxy/oxy combo been adjusted from
6 yesterday? If so, can you please take a look at
7 this customer? See e-mail below."

8 And then Jay Spellman says:

■ ██
■ ██
■ ██
■ ██

13 customer will not get an increase, and I have
14 retired the DEA and removed the schedule."

15 So "retired DEA" means he's been -- his
16 control has been pulled?

17 A. Correct.

18 Q. Because his volume looked to be
19 unacceptable; is that right?

20 A. Correct. Obviously, to Jay it did.

21 Q. Does it look unacceptable to you, too?

22 A. It looks high, yeah.

■ ■ ██
■ ██
■ ██

1 MS. KOSKI: Object to form.

2 A. This is where additional education and
3 coaching of the sales reps was occurring at -- by
4 the sales manager, and even the sales managers
5 needed some coaching and development in that area as
6 well.

7 Q. So then Vickie Shalley writes to Roberta
8 Weiniger: "Sorry, Roberta, but this is why I said
9 to choose your battles wisely. They now have pulled
10 the DEA altogether." Right?

11 A. (Nodding head.)

12 Q. And "choosing battles" means leave well
13 enough alone. They're getting some. Don't push the
14 envelope and ask for more. Is that right?

15 MS. KOSKI: Object to form.

16 Go ahead.

17 A. That's the way I would interpret it, yes.
18 Roberta was known for bubbling every little thing
19 up, every little thing, not just the DEA or CII
20 issue, but every little thing. And Vicki was
21 constantly telling her, "Come on, not everything is
22 a fire, not everything is a fire." In this
23 particular case, it's good she did.

24 Q. Right, because then it resulted in getting
25 pulled instead of continuing to supply this sketchy

1 pharmacy, right?

2 A. Uh-huh.

3 MS. KOSKI: Object to form.

4 Q. Do you know whether this was reported as a
5 suspicious order to the DEA?

6 A. I'm sorry, I do not know.

7 (Discussion off the record.)

8 (Anda-Williams Exhibit 36 was marked for
9 identification.)

10 BY MS. RELKIN:

11 Q. So what we've marked as Exhibit 36 is
12 stamped 55934 through 37, and it's a series of
13 e-mails from February 17th of 2014. And this is
14 regarding an extension of customers providing
15 information?

16 A. Uh-huh.

17 Q. Actually, the first of the e-mails on the
18 last page is really February 3rd of 2014 from Latoya
19 Samuels to you and Dominic Floro. And what does
20 Ms. Samuels say to you?

21 A. It reads that: "We are following up with
22 you in regard to the status of the customers who
23 were required to provide dispensing data by January
24 the 31st for control eligibility determination.

25 "Please inform your teams that an extension

1 has been granted for those customers who have not
2 yet provided this information. Control purchasing
3 privileges will be removed if the dispensing data is
4 not provided by Friday, February the 21st."

5 Would you like me to continue?

6 Q. That's fine.

7 A. Okay.

8 Q. So this looks like an extension was not two
9 or three days, but more like three weeks; is that
10 right?

11 A. From the February 3rd to the 21st, right.

12 Q. And "Here is the status summary" below that.
13 What -- does this chart tell us that there were
14 one thousand eighty -- can you interpret what this
15 chart says?

16 A. Give me just a moment.

17 Q. Sure.

18 A. Okay. A count of customers --

19 Q. "DD required" --

20 A. Where no --

21 Q. -- does that mean --

22 A. -- where no dispensing data was required.
23 If it was not required, it was 373. If it was
24 required, it was 710.

25 Q. "DD" is dispensing data?

1 A. Correct. Dispensing data required. So
2 what -- the way I'm interpreting this is that 373,
3 no dispensing data was required. The 710,
4 dispensing data was required.

5 Q. And it looked -- it looked like they didn't
6 have the data on 710?

7 A. And of that number, it says 50 that have
8 purchased the \$100 or less of controlled substances
9 within the last six months.

10 Q. And they were asking you whether to remove
11 the controls for those 50 since they were so small,
12 basically?

13 A. Correct. And then Dominic --

14 MS. KOSKI: Wait for a question.

15 Q. And then the famous Dominic said -- Dominic
16 Floro -- scratch that.

17 So Dominic Floro, he weighs in, and he said
18 he doesn't think you should tell the reps about the
19 extension?

20 A. Correct. That's -- that's what he wrote,
21 yes.

22 Q. He was basically -- if people knew the
23 extension, they might not work as quickly because
24 they think they have more time?

25 A. That's what he wrote, yes.

1 Q. Okay. And then Latoya Samuels said she was
2 okay with his route doing that. And then Robert
3 Brown said -- excuse me. I knew there was a piece
4 here.

5 This is you on the top. You said: "I've
6 already notified our sales reps here of the new
7 deadline. We'd already done this before I received
8 Dominic's e-mail."

9 Right?

10 A. Correct.

11 Q. And then we have the same chart for the
12 deadlines; is that right? Or did the numbers change
13 at all?

14 A. I'm look -- that's what I'm looking at.

15 Q. At 2/17.

16 A. All the numbers do agree that's -- the total
17 of the 1083. I'm just looking at how they're --
18 it's the same chart.

19 Q. It looks like there was some progress. They
20 got -- did they get more in or -- let's see.
21 Current DD required for 631, and it previously was
22 710. So that means that they got some?

23 A. (Nodding head.)

24 Q. Right?

25 A. Yes.

1 Q. All right. And then it's -- Latoya Samuels
2 noted: "There are 631 outstanding. The status
3 pivot table has been revised to clarify."

4 Do you know -- that was just days before the
5 ultimate deadline -- how many of those 631
6 ultimately provided the dispensing data?

7 A. I do not.

8 MS. KOSKI: Object to form.

9 Q. But based upon that extension, any of those
10 who did not should have been cut off, correct?

11 A. That would be my understanding from the
12 context of all this written here, yes.

13 Q. And was there a concern, when a company did
14 not provide the dispensing data, that there might be
15 reasons why they did not want to share that
16 information?

17 MS. KOSKI: Object to form. Concern by her,
18 by the witness?

19 MS. RELKIN: By the company -- by the
20 pharmacies. Strike that.

21 Q. When a customer would not be compliant,
22 despite reminders and extensions, to not provide
23 dispensing data, did that trigger in your mind and
24 the compliance department, as far as you know,
25 greater concern about the prescribing -- the

1 dispensing habits of those pharmacies?

2 A. I would say as a general rule, yes.

3 However, per our prior conversations, we did have a
4 lot of pharmacies that didn't know how to pull
5 these -- the -- this data. And so the emphasis we
6 were putting on it, the emphasis was there. The
7 calls were being made. The fact that the pharmacies
8 were not adhering to our requests became of greater
9 and greater concern.

10 Q. And that -- the last document we reviewed
11 was later in the game. That was 2014; right?

12 A. Correct. And the process was evolving, if I
13 can share -- you know, over -- things that happened
14 in 2009 and 2010 and then 2011 and 2012, this was a
15 very evolving process.

16 So, you know, Remedy was being improved.
17 The processes and the drop-downs on the menus where
18 the reps were providing information, were -- it was
19 being enhanced and made better over a period of
20 time.

21 Q. Okay.

22 (Anda-Williams Exhibit 37 was marked for
23 identification.)

24 BY MS. RELKIN:

25 Q. I've just marked as Exhibit 37 document

1 number 622234 through 36, and it's a series of
2 e-mails in June of 2014. And it's -- the first
3 e-mail is from Delores Sorenson, with the subject
4 matter: "Know your customer, KYC, revised form
5 attached," with importance being "high." And that
6 was sent to the Anda Pharmacy Florida reps and
7 managers, Anda New York sales, Anda West Coast
8 Group, and Anda Pharmacy Group, correct?

9 A. Yes.

10 Q. And Delores Sorenson was who?

11 A. She was a member of the marketing team.

12 Q. And do you see that it says under this -- is
13 that like a picture of an image of a magnifying
14 glass?

15 A. Uh-huh.

16 Q. With the customer being the image of a guy
17 in a suit with a briefcase, I guess, another guy.

18 Anyway, new question: Under this image
19 there is a staple that says: "Knowledge about a
20 customer is necessary to help determine some of the
21 financial risks we may face if providing service to
22 that customer."

23 Do you see that?

24 A. Uh-huh.

25 Q. And then this -- she attaches the form; is

1 that right? That's the "Know Your Customer" form?

2 A. Correct.

3 Q. And that's different from a questionnaire?

4 A. Yes.

5 Q. And so was -- that required an additional
6 requirement before dispensing? It was a
7 questionnaire, know your customer, and the
8 dispensing data?

9 A. The "Know Your Customer" form was used by a
10 sales rep when they were opening up a brand new
11 account to remind them of the checklist of items
12 that were needed. This didn't go to the customer.
13 This was mainly for the sales reps' and the sales
14 managers' usage.

15 Q. Okay. And then Vickie Held, and that's yet
16 another Vickie?

17 A. Same person. Vickie Shalley Held, she
18 married.

19 Q. She said: "Pat, wouldn't this have been a
20 good time to list the forms in the proper order?
21 We've been asking for this for some time now."

22 And you respond: I had nothing to do with
23 any of this."

24 Did anything come of this?

25 A. No. These were -- these were documents that

1 were being revised from time to time. And I did
2 share with Delores or -- we called her Laurie --
3 that the next time we updated, that we might want to
4 just kind of put them in a specific order.

5 Q. But the focus of the -- Anda's concern in
6 knowing the customer for this comment is: "To help
7 determine some of the financial risks we may face
8 with providing service to that customer."

9 It doesn't discuss the dangers of providing
10 controlled substances to customers who are at risk
11 for diversion; is that right?

12 A. This did not have specific application to
13 CIIs and controlled substances. This had to do with
14 knowing the entire body of your customer. And when
15 she speaks of the financial risk, every time we open
16 an account for a customer, it was a financial risk.

17 Would they pay us? What did -- how did we
18 expect payment? Are they going to be set up on
19 credit terms? Are we going to ask for funds up
20 front?

21 (Anda-Williams Exhibit 38 was marked for
22 identification.)

23 BY MS. RELKIN:

24 Q. Speaking of financial risk, let's turn to
25 Exhibit 38, document number 622647 through 49, and

1 this is an e-mail from June 10th of 2014.

2 Start with the second page. Do you see
3 there is an e-mail from Michel -- Michel -- Michel
4 Restrepo?

5 A. Yes, Michel.

6 Q. -- Michel, to customer maintenance, Lori
7 Lombardi, Charlein Lemmon and others. And the
8 subject is: "Pill mills JDE number 59213, Best Care
9 Pharmacy Inc."

10 And do you see Michel Restrepo says:
11 "Please place the account on no ship status. The
12 owner was arrested under charges of pill mills."

13 MS. RELKIN: Okay. What do we do?

14 THE VIDEOGRAPHER: Hit it again, the red
15 button.

16 MS. RELKIN: Technology and me. Sorry.
17 Sorry, everybody.

18 (Discussion off the record.)

19 BY MS. RELKIN:

20 Q. And so you have a credit analyst at Anda who
21 checks the viability of the customers?

22 A. We had a whole credit department.

23 Q. Did any of the credit analysis to the
24 financial soundness of the companies get relayed to
25 the compliance department as a factor in assessing

1 the legitimacy of the customers?

2 A. I don't know what their protocol was. I
3 know that they reviewed every account that was
4 opened and checked their credit worthiness. Some
5 they requested credit applications for, for
6 customers that were applying for credit. But what
7 their communication with compliance was, I don't
8 know.

9 Q. Okay. Anyway, customer maintenance says --
10 advises a whole host of people: "Complete. The
11 account has been placed on no ship '7' per William
12 and Ryan today."

13 Then Lori Lombardi, who was she?

14 A. Lori Lombardi was a senior account manager
15 on the pharmacy side.

16 Q. And she sends an e-mail to Vickie Held
17 saying: "Please look at their numbers. Where can I
18 make this up? Please speak with Pat."

19 And that's talking about you, right?

20 A. (Nodding head.)

21 Q. This was her account?

22 A. Obviously, yeah.

23 Q. And Vickie asks you: "Can you take a look
24 at this account? Their numbers are majority brands,
25 but Lori would like us to consider a goal adjustment

1 for both generic and brands. I told her we do not
2 typically adjust for brands. What are your
3 thoughts. Also, the customer owes us \$143,000.
4 Ouch."

5 And you advise what?

6 A. I said: You need to advise credit right
7 away to put this on no ship." But if I had done my
8 due diligence, I would have realized that's where
9 this originated from.

10 Q. Right. How many other occasions of pill
11 mills like this where the pharmacy got arrested, who
12 were your customers -- were the pharmacists or
13 employees?

14 A. That crossed my desk like this? I can only
15 remember a few. If there were others, I was not
16 there or made aware of it.

17 Q. So when you say "a few," one handful? Two
18 handfuls?

19 MS. KOSKI: Object to form.

20 A. I can only speak to those that I remember
21 coming across my desk. Things that were directly
22 related to a pill mill, maybe five, four, five. And
23 ours were mainly from things that we happened to see
24 in the newspaper, or if the sales rep heard
25 something from the customer that didn't sound right,

1 they were learning and learning and learning, and
2 they would bring it to our attention.

3 Q. Just in terms of terminology, when there's
4 e-mails that talk about "op" --

5 A. "Op"?

6 Q. Yeah -- is that referring to opportunity?

7 A. I would have to see it used.

8 Q. Okay.

9 MS. RELKIN: I'm getting down to the wire.

10 MS. KOSKI: Okay.

11 (Anda-Williams Exhibit 39 was marked for
12 identification.)

13 BY MS. RELKIN:

14 Q. What we've marked as Exhibit 39 is document
15 number 1015787 through 789. These are e-mails from
16 February -- January and February of 2012.

17 Starting on the bottom, the second page --

18 A. I remember this.

19 Q. -- there is an e-mail from Deon Kenny to
20 Christine Leon-Laurent. "Someone just tried to
21 order alprazolam from this act. Very suspicious
22 call. I did not get the phone number they were
23 calling from."

24 And Christine Leon-Laurent responds: "By
25 the way, thank you for the heads-up. Did you

1 process an order?"

2 And Deon said: "No. When I told him the
3 act is not allowed to get controls, he quickly hung
4 up."

5 When it says "the act," what --

6 A. Account.

7 Q. Account. Silly me. Okay.

8 And Deon Kenny was who?

9 A. She was a member of our bench team. Our
10 bench team was a group of sales reps that would be
11 substitute sales reps for their primary sales rep
12 when they were on vacation or out sick.

13 Q. Okay. And then there is an e-mail in the
14 same chain from Christine Laurent that's on the
15 bottom of the first page. "Patrick, a bench rep,
16 got another call from the suspicious Texas caller.
17 This is the number the call name in on.

18 "I spoke to -- the number -- buyer Suzie,
19 and she said no one called from there to place an
20 order.

21 "Are we able to see what accounts would be
22 in the delivery area? Perhaps send a Remedy message
23 warning the reps? Bench is particularly vulnerable
24 because they sell to customers they do not know
25 every day."

1 So that's a problem with the bench system;
2 is that right?

3 MS. KOSKI: Object to form.

4 A. The bench reps were not as familiar with an
5 account as their actual account representative, so
6 they wouldn't have known all the little nuances,
7 maybe even the voice of the person, like a regular
8 sales rep would.

9 Q. And you responded. What did you indicate?

10 A. My response to Patrick was: "Can we talk
11 about this in the morning? I'm getting more and
12 more suspicious about the aspect we talked about a
13 week or so ago. How are they able to pick accounts
14 with a control flag of 'Y' without getting this from
15 someone? "

16 Q. Okay. What were you referring to here?

17 A. What I was referring to, we had this
18 situation -- this Memorial Medical, we had a variety
19 of callers calling from Texas that were not able to
20 validate the information on the account. We didn't
21 feel comfortable. They were hesitating. They were
22 calling from numbers that, when we called back, we
23 could not reach, almost like a burner phone kind of
24 thing. And we had notified the entire floor that
25 they needed to be extremely concerned.

1 When I was talking to Patrick about this, it
2 seemed like the suspicious callers kept calling
3 with -- on accounts and saying that they were
4 accounts who had a control, who had control
5 purchasing.

6 And my concern was: Do we possibly have
7 something that we need to look at? How can this be
8 happening? Where would they be getting this
9 information from?

10 And I wanted to pick his brain on what he
11 thought, where this could be coming from. Why was
12 it, when these callers called, they always picked an
13 account that had controls. It was becoming
14 suspicious.

15 Q. So it was either a rogue employee or a
16 hacker?

17 A. We had no idea.

18 Q. So was -- what did Patrick say?

19 A. Patrick and I did meet, and I remember when
20 we talked about this, that there was even suspicion
21 about the Fed Ex carrier delivering packages, that
22 somehow they would be able to identify. "Hey, I'm
23 delivering a controlled substance to a pharmacy."
24 And it could have been possible that somebody from
25 Fed Ex was actually then purporting to be that

1 pharmacy calling and then maybe intercepting the
2 package along the way.

3 We talked through a lot of what-if
4 scenarios. We never came to any conclusion on this
5 because every time it happened, we told them they
6 didn't have control purchasing, and the calls
7 stopped.

8 Q. Did you call the DEA?

9 A. I do -- I personally did not, but I did make
10 them aware of it.

11 Q. Do you know whether compliance called the
12 DEA?

13 A. I do not know.

14 Q. So Patrick Cochrane's e-mail to you agreed
15 with you, and at the very end he said: "Another
16 wholesaler has had the problem, and DEA was fully
17 aware."

18 Do you see that?

19 A. So that would lead you to believe that he
20 had talked to them.

21 Q. Well, do you know whether he had talked to
22 the DEA or whether it was a communication amongst
23 wholesalers?

24 A. I do not know.

25 Q. Was there any kinds of Listserv among

1 managers of the different wholesalers, you
2 communicate to keep track of, you know, rogue or
3 sketchy potential buyers?

4 A. Not that I saw, nor that I was privy to, but
5 I can't speak for compliance.

6 Q. Okay. Were you members of any professional
7 organization of other wholesale distributors where
8 you would meet with colleagues?

9 A. I was not, but I know that Robert Brown was.

10 Q. Do you know what organization he was a
11 member of?

12 A. I do not know. He just spoke of getting
13 together with peers.

14 Q. And with regard to this e-mail, even though
15 Patrick Cochrane was saying that another wholesaler
16 had the problem, the DEA was fully aware, you don't
17 know whether DEA became aware of the very problem
18 happening to Anda?

19 A. I do not know.

20 MS. RELKIN: All right. I think I'm on the
21 last exhibit, and this one is going to require
22 pulling up the spreadsheet, so we need to use the
23 videographer's computer for that. So anybody
24 who's streaming, if you're still there and
25 reading it, you're not going to be able to

1 stream, but you can still hear it.

2 THE VIDEOGRAPHER: Off the video record at
3 5:03.

4 (Recess from 5:03 p.m. until 5:06 p.m.)

5 THE VIDEOGRAPHER: Back on the record at
6 5:06.

7 (Anda-Williams Exhibit 40 was marked for
8 identification.)

9 BY MS. RELKIN:

10 Q. What we've marked as Exhibit 40 is document
11 number 109029 through 30, 030.

12 And you see originally there was an e-mail
13 from Kim Poropat to you and others regarding
14 exporters.

15 Do you see it indicates that: "Recently
16 Watson has discovered some of their product in Iran,
17 which prompted a review of our business practices
18 when selling product to customers who will
19 ultimately be taking product outside of the United
20 States.

21 "I've done a review with Anita's help in
22 identifying all customers that have purchased 100
23 units of any one product over the past year on any
24 one line. I've gone through the report and removed
25 customers that do not export that I knew from being

1 on the floor and eliminated some pharmacies that
2 bought on specials that I felt were no risk.
3 Attached is the customers that are left. I've
4 researched some and have entered comments. The last
5 column indicates that I am directing Tonya to matrix
6 these customers out of being eligible to purchase
7 Watson products at the very least. I'd like to be
8 able to find a way to identify them in TPS as known
9 exporters. Please discuss all others with your team
10 to help identify whether any of these other accounts
11 are transporting product out of the United States."

12 Do you recall this?

13 A. Uh-huh.

14 Q. And she indicates: "I'd like to set up a
15 meeting next week to discuss possibly an approval
16 process for shipments to any of the customers that
17 export. Watson is not ultimately opposed, but in
18 their case, it's better to ask for permission. In
19 regards to other vendors, we'll need to discuss if
20 we continue our current practice or also ask for
21 permission."

22 Then she ends the paragraph by saying:

23 "Personally, I don't believe we should knowingly
24 sell to a trade class that is not noted as a
25 distributor when we know they're ultimately selling

1 to someone else. Please advise of your findings on
2 the spreadsheet by Friday if possible."

3 This was a significant event, was it not?

4 A. Yes. It was -- it was an interesting event,
5 but it was not -- I don't recall that this was
6 specifically about CIIs. This was about Watson
7 products, some Watson products.

8 Q. Well, Watson had CII products, as well?

9 A. They -- they did, and I don't recall the --
10 what the full list of the -- when she did the
11 review, she said that she had done the review, and
12 that she had identified all the customers that had
13 purchased 100 units of any one product. I remember
14 some vitamins being in there in that list.

15 Q. Do you also remember that there were opioids
16 in there, too?

17 A. Oh, there were? Okay. I don't --

18 Q. Did you --

19 A. I don't recall that the opioids were
20 involved in this.

21 Q. We'll go over the spreadsheet in a minute.

22 A. Okay. Okay.

23 Q. So did you spend time going over the
24 spreadsheet with Kim and others?

25 A. I remember that she sent it to us, and then

1 we had to work with our sales managers and sales
2 reps to find out what they knew about these
3 customers.

4 Q. Right. So you wrote to Kim and others:
5 "Kim, attached is a file of all the information
6 we've been able to gather thus far. There are a few
7 stragglers, but for the most part, this is what
8 we've found."

9 So in a moment we're going to pull up the
10 spreadsheet, but my question is this e-mail from Kim
11 suggests that Anda was, in fact, selling to
12 customers who were not just pharmacies, but were
13 also selling it other -- otherwise; is that right?

14 MS. KOSKI: Object to form.

15 A. We had a variety of trade classes that we
16 sold to: Wholesalers, other wholesalers. We sold
17 to some repackagers. We did sell to some other
18 pharmacies that were -- had some affiliations with
19 some other pharmacies. So there was a variety of
20 trade classes that were reviewed in this process.

21 Q. Okay. And I want to focus just on CIIs.

22 A. Okay.

23 Q. Did you -- did you -- do you know whether
24 Anda sold any CIIs products or any controlled
25 substances to the repackagers and these other trade

1 classes, wholesalers, et cetera?

2 A. At one point they did, but when we -- when
3 management made the list not to sell to the doctors
4 and the distributors and the repackagers and the
5 veterinarians, those -- all those trade classes were
6 completely eliminated. They could not purchase from
7 us.

8 Q. But up until that time, they did?

9 A. I would think so, yes, because there was a
10 point in time when those -- when there was a line in
11 the sand between we're doing it today, we're not
12 doing it tomorrow.

13 Q. And remind me again. What was that date?

14 A. I don't recall the date.

15 Q. But you were at the company?

16 A. I remember being at the company. I want to
17 say it was somewhere in the neighborhood of late
18 2009, 2010. I don't recall the exact date.

19 Q. And during the time period preceding this
20 switchover, how were you able to do any kind of due
21 diligence investigation to find out where those
22 repackager and wholesalers -- what was happening to
23 the controlled substance products?

24 MS. KOSKI: Object to the form. Are you
25 asking if Ms. Williams did due diligence or did

1 Anda?

2 MS. RELKIN: Well --

3 MS. KOSKI: It's not clear from your
4 question.

5 MS. RELKIN: Okay.

6 Q. No. I'm asking whether you knew of any
7 protocol Anda had which would encompass your unit --
8 strike that.

9 Were you aware of any protocol Anda had to
10 due diligence -- to do due diligence to ensure that
11 these repackagers and wholesalers were not wantonly
12 distributing opioid products?

13 A. I am not. I don't -- I don't recall. I
14 didn't deal with them myself. We had very, very few
15 of those across the floor.

16 Q. And is one of the reasons why they stopped
17 that during this time period you estimate to be late
18 2009, 2010, was because of the concern that they
19 may -- the products may have gotten into the wrong
20 hands?

21 MS. KOSKI: Object to form.

22 Q. From that avenue of repackagers and
23 wholesalers?

24 A. I don't know that this particular issue
25 factored into that decision, because this situation

1 happened in 2011, versus the decision that the
2 management team had made back in that 2009, 2010
3 time frame. So whatever protocols had already been
4 put in place were already in place for this
5 particular situation.

6 Q. Okay. So let's now switch to the
7 spreadsheet that was referenced as the attached
8 document, and that spreadsheet is number -- there is
9 two spreadsheets, 109031 and 109039.

10 THE VIDEOGRAPHER: Off the record at 5:13.

11 (Recess from 5:13 p.m. until 5:22 p.m.)

12 THE VIDEOGRAPHER: Back on the record at
13 5:22.

14 (Anda-Williams Exhibit 41 was marked for
15 identification.)

16 BY MS. RELKIN:

17 Q. So what we've marked virtually as Exhibit 41
18 is a spreadsheet with the number identified
19 previously. And going to one of the items, Item
20 154, it's identified as retail independent, and then
21 the category is DVD2.

22 What is DVD?

23 A. It was a pricing program that they were on.
24 We had -- it stood for deep value discount, and it
25 was just a -- had to do with the type of pricing

1 structure they were on.

2 Q. Then there was a number there. I could go
3 all the way up if you want me to --

4 A. Could you? Because I don't know what that
5 refers to. I don't know if that was the account
6 number or if the that was a item number that she was
7 researching.

8 Okay. That was the customer number.

9 Q. You know what I'll do, is let me go to the
10 right so you can get familiar with all the
11 categories. Then there is the customer name.

12 A. Uh-huh. The current sales rep.

13 Q. Total units net and other units.

14 A. Okay.

15 Q. Watson units.

16 A. Okay. But we don't know what -- whether
17 those Watson units -- those were total Watson units,
18 regardless of what the item was.

19 Q. Right. Right.

20 A. So it could have been OTCs. It could have
21 been regular generics. Okay.

22 Q. Right. Right. You've educated me about
23 that. So now I'm trying to identify whether on here
24 there are other narcotics. And then it -- then it
25 has comments that --

1 A. Correct. That's the piece that she asked us
2 to advise of our findings. We put our findings in
3 the comment section, and I returned that file back
4 to her.

5 Q. So if you look at the comments on the third
6 item, it says: "Suspicious large quantities for a
7 retail pharmacy."

8 A. Correct, but it doesn't say which item.

9 Q. Okay.

10 A. And it was not a Watson unit, but there was
11 something there that we looked at that --

12 Q. It was -- it was --

13 A. -- we felt that needed to be looked at.

14 Q. It was a retail independent. Okay. And so
15 what other product would one deem suspicious in
16 quantities?

17 MS. KOSKI: Object to form; no foundation.

18 A. I don't know. I would have to look at that
19 customer's history to be able to say what we were
20 looking at.

21 Q. Well, in terms of your general
22 understanding, when the term "suspicious quantities"
23 were used --

24 A. It could have been anything. It could have
25 been OTCs. It could have been that they were buying

1 1,000 units of vitamin A. You know, anything that
2 was unusually large quantity would have triggered a
3 comment like that.

4 Sometimes we had aspirin, just regular
5 aspirin that was being shipped. If it's --

6 MS. KOSKI: Wait for a question.

7 THE WITNESS: Okay.

8 MS. LUND: Can you tell me, does the
9 spreadsheet bear the same AEO designation as the
10 e-mail it was attached to?

11 MS. KOSKI: Yeah, likely the attachment
12 would be the same as the cover.

13 MS. LUND: Thanks.

14 Q. So --

15 MS. KOSKI: It is likely, not unlikely.

16 Q. -- the item I'm focusing is item 154, and
17 it's another retail independent and that was at
18 DVD2. And then the pharmacy is Ultima Rx, which, if
19 you Google, it's a pharmacy in Florida and look at

20 [REDACTED]
21 A. Those are items.

22 Q. Items?

23 A. I'm assuming, what were F and G's total at
24 the top?

25 Q. We'll go back to F and G.

1 MS. KOSKI: I'm going to object to the whole
2 line of questioning. There is no foundation.
3 There is no indication this has anything to do
4 with opioids or controlled substances or
5 anything. This hasn't laid that foundation.

6 MS. RELKIN: Well, this is something that
7 the witness was involved in, in the e-mails,
8 reviewing.

9 MS. KOSKI: You asked her, and she said she
10 doesn't know, so you're pointing out these
11 product numbers.

12 BY MS. RELKIN:

13 Q. Well, you looked at this spreadsheet back
14 when that memo was written, correct?

15 A. Correct.

16 Q. Okay. Who is Anita Isabella?

17 A. She was the one who was from our database
18 management sales reporting area.

19 Q. So F is total units net and G is other
20 units. Okay?

21 A. Okay.

22 Q. So we'll go back to 154. 154, and that's
23 Ultima. Are you familiar with that pharmacy?

24 A. I remember hearing about it, but in terms of
25 knowing it intimately, no.

1 Q. What do you remember hearing about it?

2 A. They were a high volume producer, high
3 volume sales.

4 Q. For opioids?

5 A. No, just overall sales, overall generic
6 sales.

7 Q. There may have been opioids, too; you just
8 don't know one way or the other?

9 A. I don't recall them having opioids, but I
10 cannot say and swear here on a stack of Bibles that
11 they were not. I don't know what -- I don't know

█ [REDACTED] █

█ [REDACTED]

█ █ [REDACTED]

█ [REDACTED]

█ [REDACTED]

17 listed as "suspicious large quantities for retail
18 pharmacy"?

19 A. Correct.

20 Q. You would agree that that number, even if
21 they were a high volume, that's still a "suspicious
22 large" number?

23 A. And that's why it was --

24 MS. KOSKI: Objection; no foundation.

25 Q. And then was indicated: "Investigating this

1 further." Correct? Did you ever come to learn what
2 happened with that investigation?

3 A. I did not.

4 Q. Now, even though this investigation was
5 generated because of Watson's discovery that some of
6 their product was being sold in Iran -- and we don't
7 know from that memo what the product was -- the team
8 you worked with to do this investigation was able to
9 do analysis, by looking at high volume sales in the
10 aggregate, to generate the suspicion to go on this
11 list; is that right?

12 MS. KOSKI: Object to form.

13 A. Correct.

14 Q. There also was a -- some of the customers
15 that were listed distributor/wholesaler were --
16 looked to be -- claimed to be charity groups, like
17 Medicine for Missions Exporters, and I think there
18 was another medical-sounding charity group.

19 What was done to ascertain the legitimacy of
20 an entity claim to go be a charity group buying
21 product to ship outside of the country?

22 MS. KOSKI: Object to form; no foundation.

23 If you know, you can answer.

24 A. Could you repeat the question, please?

25 Q. What due diligence investigation was done to

1 ascertain if some buyer claiming to be a mission or
2 charity was buying pharmaceutical product to ship
3 outside of the country?

4 MS. KOSKI: Object to form; no foundation.

5 A. I don't recall all the particulars on that.
6 We were -- I'm going to say I don't recall the
7 details.

8 Q. So for example, here's another one. Item
9 20, Meridian International, they are listed on this
10 chart -- actually, it said Meridian International

[illegible]

17 Do you know whether there was any
18 requirement for sale to entities that were shipping
19 pharmaceutical products abroad?

20 A. No.

21 Q. You don't know?

22 A. No. There was no requirement that they had
23 to ship to -- is that what you're asking, whether or
24 not they were required to ship to a mission?

25 Q. No. Just abroad. What -- strike that.

1 When you were -- when Anda was selling
2 pharmaceutical product to entities, generally we've
3 been talking about US pharmacies with DEA licenses,
4 right?

5 A. Correct.

6 Q. Okay. Some of these entities who were --
7 claimed to be charities doing medical work outside
8 of the country or other entities who might be
9 repackaging and selling outside of the country, were
10 there any regulations you were working under to
11 determine whether or not you could sell to such an
12 entity?

13 MS. KOSKI: Object to form; no foundation,
14 and calls for a legal conclusion.

15 Are you asking if there are any regulations?

16 Q. Do you know whether they had DEA licenses?

17 A. The missions?

18 Q. Yeah.

19 A. I do not know.

20 Q. Was there any -- what was the process to
21 determine if they did? Did that not go through
22 sales?

23 A. We were selling -- when we did this due
24 diligence, we were asked to get additional
25 information on the sales to our legitimate pharmacy

1 customers. We gathered that information. We turned
2 that information back over to Kim Poropat, and they
3 were looking to standardize the process.

4 Q. Do you know what happened to this
5 investigation? Did it terminate? Was there a --
6 was there an overall report written?

7 A. I do not recall seeing a report, no.

8 Q. Here's another one. This is item 80. It
9 says: "Suspicious large quantities for retail
10 pharmacy." And the total number of units was

11 [REDACTED]

12 A. They -- she had a customer that she was
13 doing almost all OTC products with.

14 Q. That's Christina Duster?

15 A. Christina Duster.

16 Q. It was listed -- Freedom Health is the
17 customer?

18 A. Yeah. They are a vitamin only account.

19 Q. Okay. Who had these accounts --

20 MS. KOSKI: Object to form; foundation.

21 Q. -- on this spreadsheet? Was there any
22 category of sales who was in charge of the wholesale
23 distributor?

24 A. The -- these were spread across the whole
25 floor. As you can see, the sales reps' name were --

1 there were some national account managers on there.

2 Q. Okay.

3 A. Sales reps on there. There are -- there
4 were some members from other departments, from the
5 Anda meds team that were on there, some from VIP.

6 Q. Let's go to Item 154, who were that sales
7 rep.

8 Is Stephanie Steele a sales rep?

9 A. Yes, she was.

10 Q. She was in Weston, Florida?

11 A. Yes, she was.

12 Q. Did anybody speak to her about what Ultima
13 Rx was buying?

14 A. I'm positive they must have.

15 Q. But you don't know what --

16 A. I don't recall what the outcome of it was.

17 Q. Is she still with the company, as far as you
18 know?

19 A. I do not recall.

20 Q. Was she with the company when you left?

21 A. Christina?

22 Q. Yeah.

23 A. Yeah, she was with the company when I left.

24 MS. KOSKI: The amount of time, Susan?

25 THE COURT REPORTER: 13 minutes -- 12

1 minutes.

2 MS. RELKIN: I'm just about finished with
3 that.

4 (Discussion off the record.)

5 MS. KOSKI: What is it that you have on the
6 screen now?

7 MS. RELKIN: This is the companion document
8 that was also referenced. I identified both
9 numbers.

10 BY MS. RELKIN:

11 Q. Here's a Town Pharmacy which had units of
12 [REDACTED] and it was a comment: "Suspicious large
13 quantity for retail pharmacy."

14 And the rep was Andrea -- Andrea Cornelius.
15 Are you familiar with her?

16 A. I am not.

17 Q. Are you familiar with Town Pharmacy?

18 A. No, I'm not.

19 Q. Do you know what happened with that
20 investigation as to them?

21 A. No, I do not.

22 Q. Here we have a suspicious specific order
23 [REDACTED]

24 Miracle Lane Pharmacy. Did you ever hear of that?

25 A. That was a VIP rep up in New York, Becky

1 Marlowe.

2 Q. Do you know why it was a suspicious specific
3 order?

4 A. I do not know.

5 Q. Here's another "suspicious large quantities
6 for retail pharmacy." Danielle Cardiello is the
7 rep?

8 A. Yes.

9 Q. Do you know her?

10 A. Yes, she was.

11 Q. She's still with the company, do you know?

12 A. No, she's not.

13 Q. Do you know where she is now?

14 A. I do not know.

15 Q. Okay.

16 A. I believe she's retired.

17 Q. And the pharmacy was -- the customer was
18 Park Court Services, Inc.

19 Do you know what they are?

20 A. No.

21 Q. Here's another "suspicious large quantities
22 for retail pharmacy," [REDACTED]
23 James Hasket being the rep.

24 A. He was a vitamin only account rep.

25 Q. You're right. There it goes.

1 Here's someone listed as an exporter. Were
2 you able to sell controlled substances to exporters?

3 A. Ung-ugh.

4 Q. No?

5 A. Ung-ugh.

6 MS. KOSKI: Say it out loud.

7 A. No.

8 Q. Here's another one that's listed -- that
9 looks like it's another vitamin only, Christina
10 Duster.

11 A. They were flagged as suspicious for the
12 volume of the account, not necessarily -- it was the
13 volume that was causing the suspicion.

14 Q. The volume is why would a local pharmacy in
15 Florida be buying --

16 A. Correct.

17 [REDACTED]
18 That, in and of itself, flagged suspicion?

19 MS. KOSKI: I still haven't heard any
20 foundation that this has anything to do with
21 anything to do with this case.

22 MS. RELKIN: Well, we may need more
23 discovery to find out what happened to the
24 investigation. The company here is -- this looks
25 to be the same, it's that same Ultima pharmacy.

1 MS. KOSKI: This is the same spreadsheet,
2 isn't it? Those are the same numbers.

3 MS. RELKIN: They are the same numbers, so
4 maybe they are -- they're similar. They're two
5 separate numbers, but there's two spreadsheets
6 that were referenced in that.

7 All right. Well, we call for any discovery
8 regarding what happened to this investigation,
9 specifically what happened -- what the outcome
10 was of the investigation on the suspicious large
11 quantities for the Ultima prescription [REDACTED]
12 units.

13 Given the time constraints, and it's been a
14 long day for us, I thank you very much,
15 Ms. Williams, and we're concluded.

16 MS. KOSKI: No questions. Any questions in
17 the room?

18 MS. LUND: No questions.

19 MS. KOSKI: Any question on the phone?

20 (No response.)

21 MS. KOSKI: Hearing none, we're good.

22 THE VIDEOGRAPHER: The time is 5 --

23 MS. KOSKI: He said none.

24 THE VIDEOGRAPHER: The time is 5:40 p.m.

25 This marks the end of the deposition. We're now

1 off the record.

2 (Whereupon, the deposition concluded at

3 5:40 p.m.)

4

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

22

23

24

25

1 C E R T I F I C A T E

2 I, SUSAN D. WASILEWSKI, Registered
3 Professional Reporter, Certified Realtime Reporter
4 and Certified Realtime Captioner, do hereby certify
5 that, pursuant to notice, the deposition of PATRICIA
6 WILLIAMS was duly taken on Thursday,
7 December 13, 2018, at 9:22 a.m. before me.

8 The said PATRICIA WILLIAMS was duly sworn by
9 me according to law to tell the truth, the whole
10 truth and nothing but the truth and thereupon did
11 testify as set forth in the above transcript of
12 testimony. The testimony was taken down
13 stenographically by me. I do further certify that
14 the above deposition is full, complete, and a true
15 record of all the testimony given by the said
16 witness, and that a review of the transcript was
17 requested.

18

19

20 Susan D. Wasilewski, RPR, CRR, CCP

21 (The foregoing certification of this transcript does
22 not apply to any reproduction of the same by any
23 means, unless under the direct control and/or
24 supervision of the certifying reporter.)

25

INSTRUCTIONS TO WITNESS

Please read your deposition over carefully and make any necessary corrections. You should state the reason in the appropriate space on the errata sheet for any corrections that are made.

After doing so, please sign the errata sheet and date it. It will be attached to your deposition.

It is imperative that you return the original errata sheet to the deposing attorney within thirty (30) days of receipt of the deposition transcript by you. If you fail to do so, the deposition transcript may be deemed to be accurate and may be used in court.

1 - - - - -
2 E R R A T A
3 - - - - -

4	PAGE	LINE	CHANGE
5	_____	_____	_____
6	REASON:	_____	_____
7	_____	_____	_____
8	REASON:	_____	_____
9	_____	_____	_____
10	REASON:	_____	_____
11	_____	_____	_____
12	REASON:	_____	_____
13	_____	_____	_____
14	REASON:	_____	_____
15	_____	_____	_____
16	REASON:	_____	_____
17	_____	_____	_____
18	REASON:	_____	_____
19	_____	_____	_____
20	REASON:	_____	_____
21	_____	_____	_____
22	REASON:	_____	_____
23	_____	_____	_____
24	REASON:	_____	_____
25			

ACKNOWLEDGMENT OF DEPONENT

I, _____, do hereby
acknowledge that I have read the foregoing pages, 1
through 312, and that the same is a correct
transcription of the answers given by me to the
questions therein propounded, except for the
corrections or changes in form or substance, if any,
noted in the attached Errata Sheet.

PATRICIA WILLIAMS

DATE

Subscribed and sworn to before me this
____ day of _____, 20____.

My Commission expires: _____

Notary Public

	LAWYER'S NOTES		
	PAGE	LINE	
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
21			
22			
23			
24			
25			